** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

Department of the Treasury ► Go to www.irs.gov/Form990 for instructions and the latest information. A For the 2021 calendar year, or tax year beginning APR 1. 2021 and ending MAR 31, 2022 C Name of organization D Employer identification number Check if applicable: Address change THE MINNEAPOLIS FOUNDATION Name change 41-6029402 Doing business as Initial return E Telephone number Number and street (or P.O. box if mail is not delivered to street address) Room/suite Final return/ termin-ated 800 IDS CENTER, 80 S EIGHTH ST 612-672-3878 346,492,477. City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ Amended return MINNEAPOLIS, MN 55402 H(a) Is this a group return Applica-tion pending F Name and address of principal officer: GREGORY WENZ for subordinates? Yes X No SAME AS C ABOVE **H(b)** Are all subordinates included? Yes Tax-exempt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527 If "No," attach a list. See instructions J Website: ► WWW.MINNEAPOLISFOUNDATION.ORG **H(c)** Group exemption number ▶ K Form of organization: X Corporation L Year of formation: 1915 M State of legal domicile: MN Trust Association Other > Part I Summary TOGETHER WE DRIVE COLLECTIVE Briefly describe the organization's mission or most significant activities: Governance ACTION IN ORDER TO REALIZE STRONG, VIBRANT COMMUNITIES, if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 31 Number of independent voting members of the governing body (Part VI, line 1b) 4 Activities & 65 Total number of individuals employed in calendar year 2021 (Part V, line 2a) 5 32 Total number of volunteers (estimate if necessary) 6 -1,332,883. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 0. 7h **Current Year** 139,377,895. 133,631,448. Contributions and grants (Part VIII, line 1h) 8 Revenue 224,405 871,220. Program service revenue (Part VIII, line 2g) 60,762,001 69,479,695. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 493,513 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 415,800. 11 200,857,814 204,398,163. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 110,683,080 103,713,173. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 14 Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 7,450,306. 7,658,835. Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. **b** Total fundraising expenses (Part IX, column (D), line 25) 7,560,365. 10,593,794. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 125,693,751. 121,965,802. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 75,164,063. 82,432,361. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year** 5 **End of Year** 1,032,113,169 1,113,100,701. Total assets (Part X, line 16) 57,118,312, 61,084,070. 21 Total liabilities (Part X, line 26) 974,994,857. 三年 1,052,016,631. Net assets or fund balances. Subtract line 21 from line 20 ... Part II | Signature Block 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 officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign GREGORY WENZ, CFO Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature KIMBERLY ANDERSON, CPA KIMBERLY ANDERSON, CPA 12/14/22 P00188889 Paid self-employed Firm's name CLIFTONLARSONALLEN LLP 41-0746749 Preparer Firm's EIN ▶ Firm's address 8215 GREENWAY BOULEVARD, SUITE 600 Use Only Phone no.608-662-8600 MIDDLETON, WI 53562

No

X Yes

May the IRS discuss this return with the preparer shown above? See instructions

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Pa	rt III Statement of Program Se	rvice Accomplishments		
	Check if Schedule O contains a re	esponse or note to any line in this Part III		X
1	Briefly describe the organization's missi	on:		
		EROSITY BY TAKING ACTION ON THE		
		EEDSPARTNERING WITH NONPROFITS		
		VING RESEARCH AND ADVOCACY, AND		
	SERVICES TO DONORS SEEKING TO	MAKE A DIFFERENCE IN THEIR COL	MMUNITIES.	
2	, ,	ificant program services during the year v		
	prior Form 990 or 990-EZ?			Yes X No
	If "Yes," describe these new services or	n Schedule O.		
3	Did the organization cease conducting,	or make significant changes in how it cor	nducts, any program services?	Yes X No
	If "Yes," describe these changes on Sch	nedule O.		
4	Describe the organization's program ser	vice accomplishments for each of its three	ee largest program services, as measured	by expenses.
	Section 501(c)(3) and 501(c)(4) organization	tions are required to report the amount o	f grants and allocations to others, the total	al expenses, and
	revenue, if any, for each program service	e reported.		
4a		113,767,672. including grants of \$	103,713,173.) (Revenue \$	871,220.
	SEE SCHEDULE O			
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4d		•		,
	(Expenses \$	including grants of \$) (Revenue \$)
<u>4e</u>	Total program service expenses	113,767,672.		Form 990 (2021)
				rorm 330 (2021)

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Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
•	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	i i		
Ŭ	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	٣		
U	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	х	
7		-		\vdash
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		x
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			x
	Schedule D, Part III	8_		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9	Х	_
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes." complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
_	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	_ 		
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		\vdash
.,	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x
10	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	-''-		
18		10	х	
10	1c and 8a? If "Yes," complete Schedule G, Part II	18	21	\vdash
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40		x
00-	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u> </u>
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		\vdash
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	_	v	
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	X	

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Form 990 (2	2021)	THE MINNEAPOLIS FOUNDATION
Part IV	Chec	klist of Required Schedules (continued)

	·		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	<u> </u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24c		
Ч	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			1
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
_	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>			
	"Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			x
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>
J4	Part V, line 1	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	554		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
Par	Note: All Form 990 filers are required to complete Schedule O t V Statements Regarding Other IRS Filings and Tax Compliance	38	X	Ш_
ı al	Check if Schedule O contains a response or note to any line in this Part V			
	Oneon it conducte o contains a response of note to any line in this Fart v		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 116		169	140
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
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Pai	rt V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a	55		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	١ ـ	Х	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		Х	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	. 4a		х
b	If "Yes," enter the name of the foreign country	_		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	. 5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor		X	-
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	├
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required		v	
	to file Form 8282? If "Yes " indicate the number of Forms 8282 filed during the year. 7d 1	7c	Х	
	Tes, indicate the number of 1 offis 5252 filed during the year			х
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7.		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			<u> </u>
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7		
Ū	sponsoring organization have excess business holdings at any time during the year?	8		х
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		х
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	01-		Х
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a	_		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)	_		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	_		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
D	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
_		-		
с 14а		14a		х
	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	1.15		
	excess parachute payment(s) during the year?	15		x
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	. 16		х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		

If "Yes," complete Form 6069.

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 31 **1a** Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 31 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? 3 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 Х 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? X b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Х 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 14 Х Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official X 15a Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶CA, FL, MN Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records GREG WENZ - 612-672-3878

55402

800 IDS CENTER, 80 S EIGHTH ST, MINNEAPOLIS, MN

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

(A)	(B)			((C)			(D)	(E)	(F)
Name and title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	, unle: cer ar	ss pe	rson i	s both	n an	compensation	compensation	amount of
	week	<u> </u>	T an		1 00.0	174445		from the	from related organizations	other
	(list any hours for	ndividual trustee or director				l _e		organization	(W-2/1099-MISC/	compensation from the
	related	ee or	stee			nsate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	trust	nal tru		oyee	om pe		1099-NEC)	,	and related
	below	vidua	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
	line)	Ind	lust	ij,	Key	e Eig	Por			
(1) R.T. RYBAK	37.50	-		l				400 757		60.34.
PRESIDENT & CEO	25.50			Х				408,757.	0.	62,317.
(2) JEAN ADAMS	37.50	-		l				226 254		
SENIOR VICE PRESIDENT, STRATEGY & CO	25.50			Х				286,254.	0.	58,879.
(3) CHANDA BAKER	37.50	-						055 053	•	55 545
CHIEF IMPACT OFFICER	27 50				Х			257,053.	0.	57,745.
(4) CHRISTOPHER BEACH	37.50	-			,,			251 542	2	(2.52.
SENIOR VICE PRESIDENT, PHILANTHROPIC	27 50				Х			251,542.	0.	62,504.
(5) WILLIAM STERNBERG	37.50	1				, .		106 172	0	E9 376
DIRECTOR, BUSINESS DEVELOPMENT & PHI (6) GREG WENZ	37.50					Х		186,172.	0.	58,376.
CFO	37.30	1		Х				187,283.	0.	16 682
(7) MILPHA BLAMO	37.50							107,203.	0.	16,682.
VICE PRESIDENT TALENT & CULTURE		1				x		148,927.	0.	46,169.
(8) JENNY JOHNSON	37.50									
PHILANTHROPIC ADVISOR						x		137,721.	0.	49,964.
(9) SUZANNE KOEPPLINGER	37.50							·		,
DIRECTOR, CATALYST INITIATIVE						х		151,422.	0.	30,376.
(10) PATRICE RELERFORD	37.50									
SENIOR DIRECTOR, IMPACT & COLLECTIVE						х		151,675.	0.	23,160.
(11) MARGIE SORAN	4.50									
BOARD CHAIR		Х		Х				0.	0.	0.
(12) JOHN TAFT	4.50									
BOARD VICE CHAIR/INVESTMENT COMMITTE		Х		Х				0.	0.	0.
(13) MICHAEL STORK	2.50									
TREASURER/FINANCE COMMITTEE CHAIR		Х		Х				0.	0.	0.
(14) KATHLEEN MACLENNAN	1.50									
SECRETARY		Х		Х				0.	0.	0.
(15) KHADIJA ALI	1.00	-								
BOARD MEMBER		Х						0.	0.	0.
(16) JULIE BAKER	1.00	1_								_
BOARD MEMBER		Х				_		0.	0.	0.
(17) PAURVI BHATT	1.00								_	_
BOARD MEMBER		Х						0.	0.	0. Form 990 (2021)

THE MINNEAPOLIS FOUNDATION 41-6029402 Page 8 Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (A) (B) (D) (E) (F) Position Average Reportable Name and title Reportable Estimated (do not check more than one hours per compensation compensation amount of box, unless person is both an officer and a director/trustee) week from from related other (list any organizations compensation ndividual trustee or director the hours for organization (W-2/1099-MISC/ from the lighest compensated related nstitutional trustee (W-2/1099-MISC/ 1099-NEC) organization organizations ey employee 1099-NEC) and related below organizations line) (18) MAURICE BLANKS 1.00 BOARD MEMBER Х 0 0 0. (19) ANDREW DAYTON 1.00 BOARD MEMBER Х 0 0 0. (20) SCOTT ERICKSON 1.50 AUDIT COMMITTEE CHAIR X 0 0. 0. (21) AL FAN 1.50 BOARD MEMBER 0. 0. 0. (22) BILL GRAVES 1.00 BOARD MEMBER 0. 0. 0. (23) MARY GROVE 1,00 BOARD MEMBER X 0 0 0. (24) JUDY HALPER 1.00 BOARD MEMBER X 0 0. 0. (25) TONYA HAMPTON 1.50 0. BOARD MEMBER 0. 0. Х (26) RICHARD HOWELL 1.00 BOARD MEMBER 0 0. 0. 2,166,806, 0. 466,172. 1b Subtotal 0. 0. 0 c Total from continuation sheets to Part VII, Section A 0. 466,172. 2,166,806. Total (add lines 1b and 1c)

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

> Yes No 3 Х Х 4

20

Х

Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes." complete Schedule J for such person

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
PEREGRINE CAPITAL MANAGEMENT, 800 LASALLE	Beschphan et earnies	Compensation
AVENUE SUITE 1850, MINNEAPOLIS, MN 55402	INVESTMENT MANAGEMENT	401,508.
SILCHESTER INTERNATIONAL INVESTOR INC.,		,
780 THIRD AVENUE, 42ND FLOOR, NEW YORK, NY	INVESTMENT MANAGEMENT	341,247.
NEPC, LLC		
255 STATE STREET, BOSTON, MA 02109	INVESTMENT MANAGEMENT	329,550.
HS MANAGEMENT PARTNERS		
640 FIFTH AVENUE, NEW YORK, NY 10019	INVESTMENT MANAGEMENT	309,261.
VULCAN VALUE PARTNERS, 2801 HIGHWAY 280 S,		
STE 300, BIRMINGHAM, AL 35223	INVESTMENT MANAGEMENT	204,805.
2 Total number of independent contractors (including but not limited t	to those listed above) who received more than	
\$100,000 of compensation from the organization	11	
GDD DADE UIT GDGDTON A GOVERNMANTON GUDDEG	·	- 000

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 THE MINNEAPOR		41-6029402								
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A)	(D)	(E)	(F)							
Name and title	(B) (C) Average Position							Reportable	Reportable	Estimated
	hours	(cl	(check all that apply)				ly)	compensation	compensation	amount of
	per					Γ		from	from related	other
	week	_)yee		the	organizations	compensation
	(list any	or director				em plc		organization	(W-2/1099-MISC)	from the
	hours for	ordi	ee			ated		(W-2/1099-MISC)		organization
	related organizations	ustee	trust		99	ubeus				and related organizations
	below	dual tr	tional	١.	n ploy	stcon	_			organizations
	line)	Individual trustee	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) EMILY LAMBERTY	1.00									
BOARD MEMBER		Х						0.	0.	0.
(28) BINH LE	1.00									
BOARD MEMBER		Х						0.	0.	0.
(29) TODD J. LIFSON	1.00									
BOARD MEMBER		Х						0.	0.	0.
(30) BO THAO URABE	1.50									
BOARD MEMBER		х						0.	0.	0.
(31) LENI MOORE	1.00									
BOARD MEMBER		Х						0.	0.	0.
(32) BECKY O'GRADY	1.50									
ADVANCEMENT COMMITTEE CHAIR		Х						0.	0.	0.
(33) MARCIA PAGE	1.00									
BOARD MEMBER		Х						0.	0.	0.
(34) LIZ PANGERL	2.00									
MARKETING & COMMUNICATIONS COMMITTEE		Х						0.	0.	0.
(35) JUSTIN PERSUITTI	1.00									
BOARD MEMBER		х						0.	0.	0.
(36) STEPHANIE PIERCE	1.00									
BOARD MEMBER		Х						0.	0.	0.
(37) SHARON PIERCE	1.50									
IMPACT COMMITTEE CHAIR		х						0.	0.	0.
(38) PAUL REYELTS	1.00								•	
BOARD MEMBER	1.00	х						0.	0.	0.
(39) MICHAEL RODRIGUEZ	1.00							•	•	
BOARD MEMBER	1.00	х						0.	0.	0.
(40) MEG RODRIGUEZ	1.50								••	•
BOARD MEMBER	1.50	х						0.	0.	0.
(41) JOHN SULLIVAN	1.00								••	•
BOARD MEMBER	1.00	х						0.	0.	0.
								•	••	•••
		-								
Total to Part VII, Section A, line 1c										
Total to Part VII, Section A, line 1c		1								

41-6029402

Form 990 (2021)

THE MINNEAR

Statement of Revenue

			Check if Schedule O contains a	response d	or note to any lin	e in this Part VIII			
					,	(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
							function revenue	business revenue	sections 512 - 514
SS	1	<u> </u>	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues	1b					
S S			Fundraising events	1c	23,600.				
fts,			Related organizations	1d	20,000.				
ية إق									
ons,			Government grants (contributions)	1e					
utic		T	All other contributions, gifts, grants, and		133 607 848				
ë			similar amounts not included above		133,607,848.				
o d		_	Noncash contributions included in lines 1a-1f	1g \$		133 631 //8			
O g		n	Total. Add lines 1a-1f			133,631,448.			
	_		ADMINITAND ANTIJE EREG		Business Code	071 220	071 220		
<u>ic</u> e	_		ADMINISTRATIVE FEES		561000	871,220.	871,220.		
erv		b							
n S		С							
ran 3ev		d							
Program Service Revenue		е							
۵			All other program service revenue \dots						
		g	Total. Add lines 2a-2f			871,220.			
	3		Investment income (including divider						
			other similar amounts)			15,293,939.		-1,332,883.	16,626,822.
	4		Income from investment of tax-exem	pt bond pr	roceeds				
	5		Royalties			208,747.			208,747.
			(i) Real	(ii) Personal				
	6	а	Gross rents 6a						
			Less: rental expenses 6b						
		С	Rental income or (loss) 6c						
		d	Net rental income or (loss)						
	7	а	Gross amount from sales of (i) S	ecurities	(ii) Other				
			assets other than inventory 7a 196, 2	59,192.					
		b	Less: cost or other basis						
ē			and sales expenses	73,436.					
her Revenue		С	Gain or (loss) 7c 54,1	.85,756.					
Je			Net gain or (loss)			54,185,756.			54,185,756.
e			Gross income from fundraising events (r						
퉏	_		including \$ 23,600.	I .					
			contributions reported on line 1c). So	•					
			Part IV, line 18		21,022.				
		b	Less: direct expenses		20,878.				
			Net income or (loss) from fundraising		•	144.			144.
			Gross income from gaming activities						
	•	_	Part IV, line 19						
		h	Less: direct expenses						
			Net income or (loss) from gaming ac						
			Gross sales of inventory, less returns						
	10	u	and allowances						
		h	Less: cost of goods sold						
			Net income or (loss) from sales of inv						
			The modifie of floody from sales of fin	onicory	Business Code				
sn	11	9	EAP ADMIN REVENUE		561000	206,909.			206,909.
Jeo Teo	• •	a b							
Miscellaneous Revenue			,						
Sce Be		۲ C	All other revenue						
Ξ			All other revenue			206,909.			
		ਦ	Total Add lines 11a-11d			204,398,163.	871,220.	-1,332,883.	71,228,378.
	12		Total revenue. See instructions			20-100, TOO.	1 0,1,220.	1 -,352,003.	11,220,310.

132009 12-09-21

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a respons not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	95,802,283.	95,802,283.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	4,258,035.	4,258,035.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	3,652,855.	3,652,855.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	1,673,353.	860,103.	388,218.	425,032
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	4,578,774.	2,622,883.	983,448.	972,443
8	Pension plan accruals and contributions (include	205 245	450 500	03 405	F4 400
	section 401(k) and 403(b) employer contributions)	327,848.	173,590.	83,125.	71,133
9	Other employee benefits	635,814.	319,927.	208,847.	107,040
10	Payroll taxes	443,046.	253,619.	99,194.	90,233
11	Fees for services (nonemployees):				
а	Management	106 505	56.156	10.014	40 555
b	Legal	106,725.	56,156.	10,014.	40,555
С	Accounting	117,148.	1,040.	115,328.	780
d	Lobbying	39,076.	15,630.	11,723.	11,723
е	Professional fundraising services. See Part IV, line 17	2 105 220		2 105 200	
f	Investment management fees	3,185,329.		3,185,329.	
g	,	4 001 500	2 021 526	00 200	00 746
	column (A), amount, list line 11g expenses on Sch O.)	4,021,582.	3,831,536.	90,300.	99,746
12	Advertising and promotion	322,494.	318,334.	2,080.	2,080
13	Office expenses	203,024.	65,008. 390,584.	116,940. 145,326.	21,076 76,891
14	Information technology	012,001.	390,304.	143,320.	70,031
15	Royalties	604,661.	287,435.	206,197.	111,029
16	Occupancy	32,193.	16,161.	4,295.	11,737
17	Travel	32,193.	10,101.	4,293.	11,737
18	Payments of travel or entertainment expenses				
•	for any federal, state, or local public officials	429,403.	386,566.	13,697.	29,140
19	Conferences, conventions, and meetings	425,405.	300,300.	15,057.	25,140
20	Interest				
21 22	Payments to affiliates	334,642.	160,311.	111,988.	62,343
22	In	113,738.	100,511.	113,738.	02,545
23	Other expenses. Itemize expenses not covered	115,750.		110,700.	
24	above. (List miscellaneous expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	LICENCES, PERMITS, FEES	252,676.	169,166.	41,060.	42,450
b	STAFF DEVELOPMENT	185,975.	96,592.	37,499.	51,884
C	PRINTING AND PUBLICATIO	16,643.	14,251.	52.	2,340
d	MISCELLANEOUS EXPENSES	15,684.	15,607.	-	77
e	All other expenses	,	, ,		<u> </u>
25	Total functional expenses. Add lines 1 through 24e	121,965,802.	113,767,672.	5,968,398.	2,229,732
<u></u> 26	Joint costs. Complete this line only if the organization	, ,	, ,	, ,	, ,
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2021) Part X Balance Sheet

Par	ιχ	Balance Sneet					
		Check if Schedule O contains a response or r	ote to ar	ny line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			22,008,686.	1	36,047,420
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net		753,000.	3	200,00	
	4	Accounts receivable, net	264,730.	4	36,43		
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sub					
		controlled entity or family member of any of the	nese pers	ons		5	
	6	Loans and other receivables from other disqu					
		under section 4958(f)(1)), and persons describ	ed in sec	ction 4958(c)(3)(B)		6	
s,	7	Notes and loans receivable, net			24,010,574.	7	17,161,84
Assets	8	Inventories for sale or use				8	
¥	9	B			50,809.	9	17,60
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a				
	b	Less: accumulated depreciation	10b	3,518,674.	663,404.	10c	507,88
	11	Investments - publicly traded securities			682,986,733.	11	688,742,99
	12	Investments - other securities. See Part IV, line	e 11		246,815,641.	12	316,851,91
	13	Investments - program-related. See Part IV, lin	e 11			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			54,559,592.	15	53,534,61
	16	Total assets. Add lines 1 through 15 (must e	qual line :	33)	1,032,113,169.	16	1,113,100,70
	17	Accounts payable and accrued expenses		1,420,744.	17	1,758,75	
	18	Grants payable		8,707,106.	18	9,569,09	
	19	Deferred revenue			397,125.	19	315,09
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complet	e Part IV	of Schedule D	31,813,402.	21	35,341,12
နွ	22	Loans and other payables to any current or fo	rmer offic	cer, director,			
Ĭ		trustee, key employee, creator or founder, sub	ostantial (contributor, or 35%			
Liabilities		controlled entity or family member of any of the	nese pers	ons		22	
-	23	Secured mortgages and notes payable to unr				23	
	24	Unsecured notes and loans payable to unrela-	ted third	parties		24	
	25	Other liabilities (including federal income tax,	payables	to related third			
		parties, and other liabilities not included on lin	es 17-24). Complete Part X			
		of Schedule D		<u>-</u>	14,779,935.	25	14,099,990
_	26				57,118,312.	26	61,084,07
,		Organizations that follow FASB ASC 958, c	heck her	re 🕨 🗓			
ĕ		and complete lines 27, 28, 32, and 33.					
<u>a</u>	27				856,388,900.	27	931,201,363
20	28	Net assets with donor restrictions			118,605,957.	28	120,815,26
<u> </u>		Organizations that do not follow FASB ASC	958, ch	eck here 🕨 📖			
<u>-</u>		and complete lines 29 through 33.					
2	29	Capital stock or trust principal, or current fund				29	
Sse	30	Paid-in or capital surplus, or land, building, or				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated				31	
<u>8</u>	32	Total net assets or fund balances			974,994,857.	32	1,052,016,63
	33	Total liabilities and net assets/fund balances			1,032,113,169.	33	1,113,100,701

Pai	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	204	,398,	163.
2	Total expenses (must equal Part IX, column (A), line 25)	2	121	,965,	802.
3	Revenue less expenses. Subtract line 2 from line 1	3	82	,432,	361.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	974	,994,	857.
5	Net unrealized gains (losses) on investments	5	-3	,300,	738.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-2	,109,	849.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	1,052	,016,	631.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				Щ.
				Yes	No
1	Accounting method used to prepare the Form 990:				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	Separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2021)

132012 12-09-21

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021
Open to Public

Inspection
Employer identification number

THE MINNEAPOLIS FOUNDATION 41-6029402 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions)) Total

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support	7.		,			
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Gifts, grants, contributions, and	, ,	` ,	. ,	, ,	` '	. ,
	membership fees received. (Do not						
	include any "unusual grants.")	104,194,055.	72,833,958.	107,429,335.	139,377,895.	133,631,448.	557,466,691.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	104,194,055.	72,833,958.	107,429,335.	139,377,895.	133,631,448.	557,466,691.
	The portion of total contributions						_
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						71,607,138.
6	Public support. Subtract line 5 from line 4.						485,859,553.
	ction B. Total Support						· , , , , , , , , , , , , , , , , , , ,
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 4	104,194,055.	72,833,958.	107,429,335.	139,377,895.	133,631,448.	557,466,691.
	Gross income from interest,	, , ,	, , ,	, , ,	, , ,	, , ,	, , ,
Ü	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	12,426,936.	14,354,545.	15,681,350.	12,173,348.	16,835,569.	71,471,748.
۵	Net income from unrelated business	,,		,,,	,,		, ,
9	activities, whether or not the						
	business is regularly carried on	-23,553.	-3,482.	23,432.	-542,219.	-1,332,739.	-1,878,561.
10	Other income. Do not include gain	20,000.	0,102.	20,102.	012,113.	1,002,703.	2,0,0,002.
10	or loss from the sale of capital						
	assets (Explain in Part VI.)	207,539.	196,224.	278,664.	294,400.	206,909.	1,183,736.
44		207,333.	130,221.	270,001.	231,100.	200,505.	628,243,614.
	Total support. Add lines 7 through 10 Gross receipts from related activities,					12	2,445,550.
12	'	•	,				2,443,330.
13	First 5 years. If the Form 990 is for the	_		_			▶□
Sec	organization, check this box and store ction C. Computation of Publi						·········· P
	Public support percentage for 2021 (li			column (f))		14	77.34 %
						15	76.16 %
15							
10a	33 1/3% support test - 2021. If the content have The experience qualifies						
L	stop here. The organization qualifies						
L	33 1/3% support test - 2020. If the c						
47.	and stop here. The organization qual						
1/a	10% -facts-and-circumstances test	-					
	and if the organization meets the facts		•	•		· ·	
	meets the facts-and-circumstances te	-	-		-		
b	10% -facts-and-circumstances test	-					10% or
	more, and if the organization meets the				-		, —
	organization meets the facts-and-circu		-	•	• • •		>
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions						

Schedule A (Form 990) 2021

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Secti	ion A. Public Support	low, picase comp	nete i art ii.j				
Calend	ar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
n	Sifts, grants, contributions, and nembership fees received. (Do not not not not not not not not not no						
n fo a	aross receipts from admissions, nerchandise sold or services per- ormed, or facilities furnished in ny activity that is related to the irganization's tax-exempt purpose						
а	Gross receipts from activities that re not an unrelated trade or busness under section 513						
iz	ax revenues levied for the organ- cation's benefit and either paid to rexpended on its behalf						
5 T	the value of services or facilities urnished by a governmental unit to the organization without charge						
	otal. Add lines 1 through 5						
	mounts included on lines 1, 2, and received from disqualified persons						
fro ex	mounts included on lines 2 and 3 received om other than disqualified persons that xceed the greater of \$5,000 or 1% of the mount on line 13 for the year						
сА	add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 A 10a G d s	Amounts from line 6 Gross income from interest, lividends, payments received on ecurities loans, rents, royalties, nd income from similar sources	(4) 2011	10/2010	(0) 20 10	(4) 2020	(6) 202.	(1) 10101
b U (I	Inrelated business taxable income less section 511 taxes) from businesses cquired after June 30, 1975						
11 N a	dd lines 10a and 10b						
12 C	other income. Do not include gain or loss from the sale of capital ssets (Explain in Part VI.)						
	otal support. (Add lines 9, 10c, 11, and 12.)			1			<u> </u>
	irst 5 years. If the Form 990 is for the	· ·			•		. —
	heck this box and stop here						>
	ion C. Computation of Public			. (6)		145	
	Public support percentage for 2021 (lin		•	.,,		15	<u>%</u>
	Public support percentage from 2020					16	%
	ion D. Computation of Invest			ino 10 pali ima (n)		17	0/
	nvestment income percentage for 202					17	<u>%</u>
	nvestment income percentage from 2			on line 14 and line		18	%
	3 1/3% support tests - 2021. If the					- 4.5	▶ □
b 3	nore than 33 1/3%, check this box and 3 1/3% support tests - 2020. If the	organization did n	not check a box or	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	and
lii	ne 18 is not more than 33 1/3%, chec	k this box and st	top here. The orga	nization qualifies a	as a publicly supp	orted organization	▶∐
20 P	Private foundation. If the organization	n did not check a	hox on line 14 19	a or 19h check th	nis hox and see in	structions	

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Schedule A (Form 990) 2021

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes." answer lines 3b and 3c below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? |f "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? |f "Yes." answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes." provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes." complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in Part VI.
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	2		
	2-		
	3a		
	3b		
	0.0		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b 5c		
	30		
	6		
	7		
	8		
	9a		
	9b		
	9с		
	10a		
	46.		
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Pa	TIV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
800	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions))-		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	struction		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	_		
_	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
-	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
_	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b		6.		
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

THE MINNEAPOLIS FOUNDATION

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orga	nizations			
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust or	n Nov. 20, 1970 (<i>explain in</i> l	Part VI). See instructions.		
	All other Type III non-functionally integrated supporting organizations must complete Sections A through E.					
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)		
1	Net short-term capital gain	1				
2	Recoveries of prior-year distributions	2				
_3	Other gross income (see instructions)	3				
_4	Add lines 1 through 3.	4				
_5	Depreciation and depletion	5				
6	Portion of operating expenses paid or incurred for production or					
	collection of gross income or for management, conservation, or					
	maintenance of property held for production of income (see instructions)	6				
_ 7	Other expenses (see instructions)	7				
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8				
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)		
1	Aggregate fair market value of all non-exempt-use assets (see					
	instructions for short tax year or assets held for part of year):					
а	Average monthly value of securities	1a				
b	Average monthly cash balances	1b				
С	Fair market value of other non-exempt-use assets	1c				
d	Total (add lines 1a, 1b, and 1c)	1d				
е	Discount claimed for blockage or other factors					
	(explain in detail in Part VI):					
2	Acquisition indebtedness applicable to non-exempt-use assets	2				
3	Subtract line 2 from line 1d.	3				
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,					
	see instructions).	4				
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
_6	Multiply line 5 by 0.035.	6				
7	Recoveries of prior-year distributions	7				
8	Minimum Asset Amount (add line 7 to line 6)	8				
Sect	ion C - Distributable Amount			Current Year		
1	Adjusted net income for prior year (from Section A, line 8, column A)	1				
2	Enter 0.85 of line 1.	2				
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3				
4	Enter greater of line 2 or line 3.	4				
5	Income tax imposed in prior year	5				
6	Distributable Amount. Subtract line 5 from line 4, unless subject to					
	emergency temporary reduction (see instructions).	6				
7	Check here if the current year is the organization's first as a non-functional	y integra	ted Type III supporting orga	nization (see		
	instructions).					

Schedule A (Form 990) 2021

Par	rt V	Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	ınizations _{(continu}	ed)	
Sect	ion D -	Distributions				Current Year
1	Amou	nts paid to supported organizations to accomplish exer	mpt purposes		1	
2		nts paid to perform activity that directly furthers exemp				
	organi	zations, in excess of income from activity		2		
3	Admin	istrative expenses paid to accomplish exempt purpose	s	3		
4		nts paid to acquire exempt-use assets		4		
5		ied set-aside amounts (prior IRS approval required - pro		5		
6		distributions (describe in Part VI). See instructions.		6		
7		annual distributions. Add lines 1 through 6.		7		
8		outions to attentive supported organizations to which the	ne organization is responsive			
		de details in Part VI). See instructions.	3		8	
9		outable amount for 2021 from Section C, line 6			9	
10		amount divided by line 9 amount			10	
			(i)	(ii)		(iii)
Secti	ion E -	Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2021	s	Distributable Amount for 2021
1	Distrib	outable amount for 2021 from Section C, line 6				
2	Under	distributions, if any, for years prior to 2021 (reason-				
	able c	ause required - explain in Part VI). See instructions.				
3	Exces	s distributions carryover, if any, to 2021				
a	From 2	2016				
b	From 2	2017				
С	From 2	2018				
d	From 2	2019				
е	From 2	2020				
f	Total	of lines 3a through 3e				
g	Applie	ed to underdistributions of prior years				
h	Applie	ed to 2021 distributable amount				
i	Carryo	over from 2016 not applied (see instructions)				
	Remai	inder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distrib	outions for 2021 from Section D,				
	line 7:	\$				
a	Applie	ed to underdistributions of prior years				
		ed to 2021 distributable amount				
	Remai	inder. Subtract lines 4a and 4b from line 4.				
5		ining underdistributions for years prior to 2021, if				
		subtract lines 3g and 4a from line 2. For result greater				
		ero, explain in Part VI. See instructions.				
6		ining underdistributions for 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in					
		1. See instructions.				
7		s distributions carryover to 2022. Add lines 3j				
•	and 4					
8		down of line 7:				
		s from 2017				
		s from 2018				
		s from 2019				
		s from 2020				
		s from 2021				

Schedule A (Form 990) 2021

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:
OTHER REVENUE (PRIMARILY EMPLOYEE ASSISTANCE PLAN FEES)
2017 AMOUNT: \$ 207,539.
2018 AMOUNT: \$ 196,224.
2019 AMOUNT: \$ 278,664.
2020 AMOUNT: \$ 294,400.
2021 AMOUNT: \$ 206,909.

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

Employer identification number

2021

Schedule B (Form 990) (2021)

THE MINNEAPOLIS FOUNDATION 41-6029402						
Organization	type (check one)	:				
Filers of:	s	ection:				
Form 990 or 9	90-EZ	501(c)(³) (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				
Note: Only a s General Rule For a	section 501(c)(7), in organization fil erty) from any on	overed by the General Rule or a Special Rule . (8), or (10) organization can check boxes for both the General Rule and a Special Rule ing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling e contributor. Complete Parts I and II. See instructions for determining a contributor.	g \$5,000 or more (in money or			
section control or (ii)						
litera	ry, or educationa	e year, total contributions of more than \$1,000 exclusively for religious, charitable, so Il purposes, or for the prevention of cruelty to children or animals. Complete Parts I (e stead of the contributor name and address), II, and III.	•			
year, is che purpo	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					
answer "No" o	aution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must name "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify at it doesn't meet the filing requirements of Schedule B (Form 990).					

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Name of organization

Employer identification number

THE MINNEAPOLIS FOUNDATION

41-6029402

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions Type	(d) of contribution
1			oll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions Type	of contribution
2		(Comple	
(a)	(b)	(c)	(d)
No. 3	Name, address, and ZIP + 4	Pers Payr \$ 5,881,511. (Comple	
(a)	(b)	(c)	(d)
No. 4	Name, address, and ZIP + 4	Pers Payr \$ 5,613,152. (Comple	oll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions Type	(d) of contribution
5	Name, audi 655, and Air + 4	Pers Payr \$ 5,350,000. (Comple	on X
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions Type	(d) of contribution
6 <u>6</u>	Ivallie, audi ess, and ZIP + 4	Pers Payr \$ 5,000,000. (Comple	on X

Name of organization

Employer identification number

THE MINNEAPOLIS FOUNDATION

41-6029402

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
7		\$	Person X Payroll
(a)	(b)	(c) Total contributions	(d) Type of contribution
No. 8	Name, address, and ZIP + 4	\$\$ 4,411,731.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) Total contributions	(d) Type of contribution
9 9	Name, address, and ZIP + 4	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
10	Name, address, and ZIP + 4	\$\$ 3,425,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
.1001	Hame, address, and Ell TT	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
NO.	Name, autress, and ZIP + 4	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

THE MINNEAPOLIS FOUNDATION 41-6029402

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	29,450 SHARES OF GOLDMAN SACHS BDC, INC SECURITIES		12/16/21		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
2	4 SHARES OF INVESTMENT ALLIANCE		08/10/21		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
7	5,000,000 SHARES OF BAGOS BUN COMPANY LTD		12/22/21		
(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		
			Colordado B (Form 000) (000d)		

Name of organization **Employer identification number** THE MINNEAPOLIS FOUNDATION $41\!-\!6029402$ 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 info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

Section 501(c)(4) (5) or (6) organizations: Complete Part III.

	1001(0)(+), (0), 01 (0) 01guill200	ions. complete r art iii.		1			
Name of o	rganization			Empl	Employer identification number		
		POLIS FOUNDATION			41-6029402		
Part I-A	Complete if the org	janization is exempt und	ler section 501(c)	or is a section 527 org	ganization.		
2 Politic		cation's direct and indirect politic ures gn activities			0.		
Part I-E	Complete if the org	anization is exempt und	ler section 501(c)(3).			
1 Enter		incurred by the organization un		▶ \$	0.		
	•	incurred by organization manag					
		n 4955 tax, did it file Form 4720					
	s," describe in Part IV.						
Part I-C	Complete if the org	janization is exempt und	ler section 501(c),	except section 501(c)	(3).		
1 Enter	the amount directly expended	by the filing organization for se	ection 527 exempt func	tion activities >\$			
	• •	ization's funds contributed to o	·				
	0 0		· ·				
		. Add lines 1 and 2. Enter here					
	•			•			
		1120-POL for this year?					
		nployer identification number (E					
	,	tion listed, enter the amount pa	,	•	0 0		
	• •	omptly and directly delivered to			· · · · · · · · · · · · · · · · · · ·		
	•	additional space is needed, pro		•			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political		
	(a) Name	(b) Address	(c) Liiv	filing organization's funds. If none, enter -0	contributions received and promptly and directly delivered to a separate political organization. If none, enter -0		

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990) 2021

LHA

132041 11-03-21

Part II-A Complete if the org	anization is exem	npt under section	501(c)(3) and file		ction under
expenses, and share	e of excess lobbying e		Part IV each affiliated o	group member's name	e, address, EIN,
Limit	s on Lobbying Expen	ditures	visions apply.	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ence public opinion (g	rassroots lobbying)		0.	
b Total lobbying expenditures to influ		/ II		20,000.	
c Total lobbying expenditures (add lir			F	20,000.	
d Other exempt purpose expenditure				119,716,070.	
e Total exempt purpose expenditures		119,736,070.			
f Lobbying nontaxable amount. Ente				1,000,000.	
If the amount on line 1e, column (a) or		oying nontaxable amo			
Not over \$500,000	•	he amount on line 1e.			
Over \$500,000 but not over \$1,000		0 plus 15% of the exce	ess over \$500,000.		
Over \$1,000,000 but not over \$1,50		0 plus 10% of the exce	<u> </u>		
Over \$1,500,000 but not over \$17,0		0 plus 5% of the exces			
Over \$17,000,000	\$1,000,0	•			
	+ -,=,-				
g Grassroots nontaxable amount (en	ter 25% of line 1f)			250,000.	
h Subtract line 1g from line 1a. If zero	,			0.	
i Subtract line 1f from line 1c. If zero				0.	
j If there is an amount other than zer reporting section 4911 tax for this y	o on either line 1h or li	ne 1i, did the organiza	_		Yes No
(Some organizations th	4-Year Ave nat made a section 50	raging Period Under	Section 501(h) nave to complete all o		low.
	Lobbying Expen	ditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
c Total lobbying expenditures	75,100.	38,900.	26,277.	20,000.	160,277.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.

Schedule C (Form 990) 2021

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	ch "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(k)
of the lobbying activity. Yes				Amo	ount
1 [During the year, did the filing organization attempt to influence foreign, national, state, or				
le	ocal legislation, including any attempt to influence public opinion on a legislative matter				
c	or referendum, through the use of:				
a ∖	Volunteers?				
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c N	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
f(Grants to other organizations for lobbying purposes?				
_	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h F	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?				
	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	f "Yes," enter the amount of any tax incurred under section 4912				
	f "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	f the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? III-A Complete if the organization is exempt under section 501(c)(4), section	2 E01(a)(E)	or 000	tion	
)~~+	501(c)(6).	1 30 1 (0)(3)	, or sec	LION	
art	30 1(0)(0).				
art	301(3)(0).			Yes	N
	Were substantially all (90% or more) dues received nondeductible by members?		. 1	Yes	N
1 V				Yes	N
2 [3 [Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	e prior year? 1 501(c)(5)	2 3 , or sec	tion	
1 V 2 [3 [Part	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members	e prior year? n 501(c)(5), No" OR (b	3 , or sec o) Part I	tion	
1 V 2 [3 [Part	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	e prior year? n 501(c)(5), No" OR (b	3 , or sec o) Part I	tion	
1 V 2 [3 [2 art	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).	e prior year? 1 501(c)(5) No" OR (b	g 3 , or sec) Part I	tion	
1 V 2 [3 [2 art	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year	e prior year? 1 501(c)(5) No" OR (b	2 3 , or sec) Part I	tion	
11 \\ 22 \[\] 2 \\ 2 \\ 2 \\ 2 \\ 2 \\ 4 \\ 4 \\ 6 \\ 6 \\ 6 \\ 6 \\ 6 \\ 6	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the string of \$100 or less? Complete if the organization is exempt under section \$01(c)(4), section \$01(c)(6)\$ and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section \$27(f)\$ tax was paid). Current year Carryover from last year	e prior year? 1 501(c)(5) No" OR (b	2 3, or sec 3) Part I	tion	
1 \ \V2 \ \cdot \c	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the string of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the string of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year	e prior year? n 501(c)(5). No" OR (b	2 3 , or sec) Part I	tion	
1 V 22 [33 [Part	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the source of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the source of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the source of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the section \$01(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	e prior year? 1 501(c)(5) No" OR (b	2 3 , or sec) Part I	tion	3, is
11 V 22 [33 [2art] 11 [22 S 6	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the solid the organization agree to carry over lobbying and political campaign activity expenditures from the solid the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds	e prior year? 1 501(c)(5) No" OR (b	2 3 , or sec) Part I	tion	
11 V 2 [33 [33 [34]]] 11 [34] 12 [34]	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the source of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the source of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the source of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues for notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polynomials agree to carryover to the reasonable estimate of nondeductible lobbying and polynomials are not tree?	e prior year? 1 501(c)(5) No" OR (b	2 3 , or sec b) Part I	tion	
11 V 2 [33 [33 [34]]] 11 [34] 12 [34]	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the solid the organization agree to carry over lobbying and political campaign activity expenditures from the solid the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds	e prior year? 1 501(c)(5) No" OR (b	2 3 , or sec) Part I	tion	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

►Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Inspection

Name of the organization

THE MINNEAPOLIS FOUNDATION

Employer identification number

 $41\!-\!6029402$

Pai	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		er Si	milar Funds or	Accour	nts. Complete if	the	
	organization anomorous yes on year to the second active, mile	(a) Donor ac	lvised	f funds	(b) Fur	nds and other acco	ounts	
1	Total number at end of year			1009			571	
2	Aggregate value of contributions to (during year)			94,131,411.		40	,099,059.	
3	Aggregate value of grants from (during year)			76,937,529.		29	,489,245.	
4	Aggregate value at end of year					555	,381,215.	
5	Did the organization inform all donors and donor advisors in w	riting that the asset	s hel	d in donor advised f	funds			
	are the organization's property, subject to the organization's e	xclusive legal contr	ol?			Yes	☐ No	
6	Did the organization inform all grantees, donors, and donor ad	visors in writing tha	t gra	nt funds can be use	d only			
	for charitable purposes and not for the benefit of the donor or	donor advisor, or fo	or any	other purpose con	ferring			
_	impermissible private benefit?						No	
Par	t II Conservation Easements. Complete if the organic	anization answered	"Yes	" on Form 990, Part	IV, line 7			
1	Purpose(s) of conservation easements held by the organization		oly).					
	Preservation of land for public use (for example, recreati	on or education)		Preservation of a h			ea	
	Protection of natural habitat			Preservation of a c	ertified hi	istoric structure		
	Preservation of open space							
2	Complete lines 2a through 2d if the organization held a qualified	ed conservation cor	ntribu	tion in the form of a	conserva			
	day of the tax year.					Held at the End of	the rax year	
a	Total number of conservation easements				l			
b								
C	Number of conservation easements on a certified historic structure.				2c			
d	Number of conservation easements included in (c) acquired af				04			
3	listed in the National Register Number of conservation easements modified, transferred, rele				. 2d	during the toy		
3	year	ased, extiliguisiled,	Or te	iminated by the org	jariizatiori	during the tax		
4	Number of states where property subject to conservation ease	ement is located						
5	Does the organization have a written policy regarding the period		pecti	on, handling of				
	violations, and enforcement of the conservation easements it h					Yes	☐ No	
6	Staff and volunteer hours devoted to monitoring, inspecting, h					ements during the	year	
	>							
7	Amount of expenses incurred in monitoring, inspecting, handli	ng of violations, an	d enf	orcing conservation	easemen	nts during the year		
	> \$							
8	Does each conservation easement reported on line 2(d) above							
	and section 170(h)(4)(B)(ii)?					Yes	No	
9	In Part XIII, describe how the organization reports conservation							
	balance sheet, and include, if applicable, the text of the footnot	ote to the organizati	on's	financial statements	that desc	cribes the		
Dai	organization's accounting for conservation easements. t III Organizations Maintaining Collections of A	Art Historical	Tros	sures or Othe	r Simila	r Assats		
ı aı	Complete if the organization answered "Yes" on Form 9	-	1100	isures, or other	i Giiiiia	ii Assets.		
12	If the organization elected, as permitted under FASB ASC 958		rovo	nuo statomont and	halanco el	hoot works		
Ia	of art, historical treasures, or other similar assets held for publi	•						
	service, provide in Part XIII the text of the footnote to its finance	•			Statice of	public		
h	If the organization elected, as permitted under FASB ASC 958				nce sheet	t works of		
	art, historical treasures, or other similar assets held for public e	•						
	provide the following amounts relating to these items:	oxinoition, caacatio	11, 01	researon in landinera	.100 01 pa	ibilo del vide,		
	(i) Revenue included on Form 990, Part VIII, line 1				•	\$		
	(ii) Assets included in Form 990, Part X					\$		
2	If the organization received or held works of art, historical treas				 in. provide	e		
_	the following amounts required to be reported under FASB AS				., 12. 3 7 141			
а	· · · · · · · · · · · · · · · · · · ·				•	\$		
		Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X \$ \bigs\tag{\text{\texi\texi{\texi{\texi}\text{\text{\text{\texi{\texi\text{\text{\texi\						

Schedule D (Form 990) 2021

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

	Time Organizations Maintaining O	chections of Air	i, motorioai i	cuoui co, oi	Othici	Omman	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(continu	iea)	_
3	Using the organization's acquisition, accession	on, and other records	s, check any of the	e following that	make sig	nificant us	se of its			
	collection items (check all that apply):									
а	Public exhibition	d	Loan or e	kchange progra	am					
b	Scholarly research	е	Other							
С	Preservation for future generations									
4	Provide a description of the organization's co	llections and explain	how they further	the organizatio	n's exem	pt purpose	e in Part	XIII.		
5	During the year, did the organization solicit or									
	to be sold to raise funds rather than to be ma							Yes	□ N	0
Par	t IV Escrow and Custodial Arrang							line 9, or		
	reported an amount on Form 990, Par		· ·				·	•		
1a	Is the organization an agent, trustee, custodia	an or other intermedi	ary for contribution	ns or other ass	ets not in	ncluded				_
	on Form 990, Part X?							Yes	X N	0
b	If "Yes," explain the arrangement in Part XIII a							_		
_	g		g					Amount		_
С	Beginning balance					1c				_
										_
	d Additions during the year 1d 1e Distributions during the year 1e									
f						1f				—
	Ending balance Did the organization include an amount on Fo						Тх	Yes	□ N	_
	If "Yes," explain the arrangement in Part XIII.					•			X	,
Par						n				_
	острых п	(a) Current year	(b) Prior year	(c) Two year		d) Three ye	ars back	(e) Four	years back	_
10	Beginning of year balance	344,554,365.	252,164,376			293,65			000,837	_
		7,769,207.	5,598,962				2,003.		555,470	_
	Contributions Net investment earnings, gains, and losses	35,936,698.	99,843,103				0,409.		044,254	_
	Grants or scholarships	14,157,358.	13,052,076	-			4,848.	<u> </u>	943,490	_
	Other expenditures for facilities	22,207,000	20,002,07	11,000	, , , , ,	0,20	-,	,	, 10 , 15 0	÷
-										
	and programs									_
	Administrative expenses	374,102,912.	3// 55/ 36	252 164	376	288,46	1 635	293 (557,071	—
g	End of year balance				, 370.	200,40	1 ,033.	233,	337,071	÷
2	Provide the estimated percentage of the curre	ent year end balance 86.6740	-	(a)) neid as:						
_	Board designated or quasi-endowment		_%							
b	Permanent endowment 13.3260	%								
С	Term endowment ▶									
	The percentages on lines 2a, 2b, and 2c shou	•								
3a	Are there endowment funds not in the posses	ssion of the organiza	tion that are held	and administer	ed for the	e organizat	ion	Г	Vaa Na	_
	by:								Yes No	_
	(i) Unrelated organizations							3a(i)	X	_
	(ii) Related organizations							3a(ii)	X	_
b	If "Yes" on line 3a(ii), are the related organizate			?				3b		_
4	Describe in Part XIII the intended uses of the	organization's endo	wment funds.							
Par	t VI Land, Buildings, and Equipm									
	Complete if the organization answered		1	T			<u> </u>			_
	Description of property	(a) Cost or o	, , ,	st or other		cumulated	t	(d) Book	value	
		basis (investr	nent) bas	s (other)	dep	reciation				_
	Land									_
	Buildings						_			_
С	Leasehold improvements			2,407,103.		2,046,1			360,914	_
d	Equipment			1,619,458.		1,472,4	85.		146,973	•
	Other									
Total	. Add lines 1a through 1e. (Column (d) must ed	gual Form 990, Part	X. column (B). line	10c.)				į	507,887	•
						S	chedule	D (Form	990) 202	21

Part VII	Investments -	 Other Securities
----------	---------------	--------------------------------------

Fait viii ilivestillellts - Otilel Secultiles.		
Complete if the organization answered "Yes" of	on Form 990, Part IV, line 1	1b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) DOMESTIC EQUITY/LARGE CAP & MID CAP	11,067,533.	END-OF-YEAR MARKET VALUE
(B) NON-US EQUITIES	133,460,937.	END-OF-YEAR MARKET VALUE
(C) HIGH YIELD FIXED INCOME OBLIGATIONS	19,702,959.	END-OF-YEAR MARKET VALUE
(D) REAL ESTATE - INVESTMENT TRUST REITS	4,944,651.	END-OF-YEAR MARKET VALUE
(E) LONG/SHORT HEDGE FUNDS	22,286,001.	END-OF-YEAR MARKET VALUE
(F) MULTI-STRATEGY HEDGE FUNDS	18,124,854.	END-OF-YEAR MARKET VALUE
(G) COMMODITIES	8,861,849.	END-OF-YEAR MARKET VALUE
(H) PRIVATE EQUITY AND VENTURE CAPITAL	98,403,127.	END-OF-YEAR MARKET VALUE
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	316,851,911.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		
Part IX Other Assets.		

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	AMOUNTS DUE TO BENEFICIARIES	14,099,996.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	14,099,996.

^{2.} Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII X

Schedule D (Form 990) 2021

Sche	dule D (Form 990) 2021 THE MINNEAPOLIS FOUNDATION			41-602	.9402 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Stateme	ents With F	Revenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	а.			
1	Total revenue, gains, and other support per audited financial statements			1	194,376,038.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-3,300,738.		
b	Donated services and use of facilities				
С	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)		1,664,100.		
е	Add lines 2a through 2d			2e	-1,636,638.
3	Subtract line 2e from line 1			3	196,012,676.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	3,185,329.		
b	Other (Describe in Part XIII.)		5,200,158.		
	Add lines 4a and 4b			4c	8,385,487.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)			5	204,398,163.
	t XII Reconciliation of Expenses per Audited Financial Statem	ents With	Expenses per F		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a				
1				1	117,354,264.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			•	
		2a			
a	Donated services and use of facilities			•	
b	Prior year adjustments	1 _ 1			
C	Other losses		20,878.		
d	Other (Describe in Part XIII.)	<u>-</u>			20 070
e	Add lines 2a through 2d			2e	20,878.
3	Subtract line 2e from line 1			3	117,333,386.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 . 1	2 105 200		
а	Investment expenses not included on Form 990, Part VIII, line 7b		3,185,329.		
b	Other (Describe in Part XIII.)	4b	1,447,087.		4 622 446
С	Add lines 4a and 4b			4c	4,632,416.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	121,965,802.
	t XIII Supplemental Information.				
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Par			; Part X, li	ne 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add	ditional inform	ation.		
	. T T. T. T. O.D.				
PART	IV, LINE 2B:				
m11.	DOUBLE ON MANAGES BUNDS AS AN ASSUME FOR MARTINES SOMETHING ASSUMED	NI DDOUTE			
THE	FOUNDATION MANAGES FUNDS AS AN AGENT FOR VARIOUS COMMUNITY NO	DN-PROFIT			
ODGA	NITERITORIS MURICI ORGANITERITORIS MANUE ESCANDI ISMED EMINOS AU MURI				
ORGA	NIZATIONS. THESE ORGANIZATIONS HAVE ESTABLISHED FUNDS AT THE				
norn:		muo an			
FOUN	DATION AND HAVE SPECIFIED THEMSELVES AS THE BENEFICIARIES OF	THOSE			
	G MUD DOUBLEAU DEEDEG MO GUGU DUNDG AG AGENGV DUNDG				
FUNL	S. THE FOUNDATION REFERS TO SUCH FUNDS AS AGENCY FUNDS.				
mirra	EQUINDAMENT MAINMAING LEGAL OURSEDGILD OF AGENCY BUNDS AND AG	anan			
THE	FOUNDATION MAINTAINS LEGAL OWNERSHIP OF AGENCY FUNDS AND, AS	SUCH,			
CONTE	ITANIES NO DEPON NUE EINING AS ASSENS OF NUE FOUNDANTON. HOMEVE	3D 3			
CONT	INUES TO REPORT THE FUNDS AS ASSETS OF THE FOUNDATION. HOWEVE	SK, A			
LIAE	ILITY HAS BEEN ESTABLISHED FOR THE FAIR MARKET VALUE OF THE F	FUNDS.			
		<u> </u>			
PART	V, LINE 4:				
т∩ =	ENEFIT THE COMMUNITY IN ACCORDANCE WITH THE ORIGINAL DONOR'S	тифриф			
10 1	DEMOFIL THE COMMONITY IN ACCORDANCE WITH THE ORIGINAL DONOR S	TINI TINI .			

Schedule D (Form 990) 2021

1,447,087.

GRANTS MADE FOR THE BENEFIT OF CHARITABLE FUNDS HELD

SCHEDULE F (Form 990)

Department of the Treasury

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Employer identification number

THE MINNEAPOLIS FOUNDATION 41-6029402 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, X Yes the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (b) Number of (e) If activity listed in (d) (a) Region (c) Number of (d) Activities conducted in the region (f) Total employees, expenditures offices (by type) (such as, fundraising, prois a program service, agents, and for and in the region gram services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in the region in the region in the region CENTRAL AMERICA AND THE CARIBBEAN 0 0 INVESTMENTS 49,676,334. EUROPE 0 0 INVESTMENTS 10,997,891. NORTH AMERICA 0 0 GRANTS 313,855. EUROPE (INCLUDING ICELAND & GREENLAND) ALBANIA, ANDORRA, AUSTRIA, BELGIUM 0 GRANTS 105,000. 0 EAST ASIA AND THE PACIFIC - AUSTRALIA BRUNEI, BURMA, CAMBODIA. 0 0 GRANTS 5,000. SOUTH AMERICA -ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA, ECUADOR 0 0 GRANTS 3,229,000. 0 0 64,327,080. 3 a Subtotal **b** Total from continuation 0 0 0. sheets to Part I Totals (add lines 3a 64,327,080.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2021

and 3b)

Schedule F (Form 990) 2021

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV appraisal, other)
		SOUTH AMERICA -						
		ARGENTINA,						
		BOLIVIA, BRAZIL,						
		CHILE, COLUMBIA,	GENERAL SUPPORT	3,229,000.	WIRE	0.	N/A	N/A
		EUROPE (INCLUDING						
		ICELAND &	LOGISTICS PLATFORM					
		GREENLAND) -	FOR SOCIAL GROCERY					
		ALBANIA, ANDORRA,	SHOPS	10,000.	WIRE	0.	N/A	N/A
		EUROPE (INCLUDING						
		ICELAND &						
		GREENLAND) -	SUPPORT OF FRATERNITY					
		ALBANIA, ANDORRA,	BUS	10,000.	WIRE	0.	N/A	N/A
		NORTH AMERICA	PUPPY ACQUISITION FOR SERVICE DOG PROGRAM	10,000.	WIRE	0.	N/A	N/A
		EUROPE (INCLUDING	CREATION OF A RECYCLING CENTER FOR					
		GREENLAND)	STUDENTS	10,000.	WIRE	0.	N/A	N/A
			BETTER CHANCE FOR EMPLOYMENT PROGRAM AND SUPPOTING JOB SEEKING PROFESSIONAL	20,000.	WIRE	0.	N/A	N/A
			FINANCIAL SUPPORT TO LISACARNE COMMUNITY CENTRE	10,000.	WIRE	0	N/A	N/A
			GENERAL OPERATING SUPPORT	71,000.			N/A	N/A

ightharpoons	
	13

3 Enter total number of other organizations or entities .

Scriedule F (FOITH 990)								Faye Z
Part II Continuation of	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM\ appraisal, other)
		EUROPE (INCLUDING						
		ICELAND &	HOME TOWN GRANT					
		GREENLAND)	STEILSHOOPER BUDL	10,000.	WIRE	0.	N/A	N/A
		TUDODE / TNG UDING	GUDDODE HOD GOGIA					
			SUPPORT FOR SOCIAL					
		ICELAND &	HELP CENTRE FOR	40.000	L			
		GREENLAND)	FAMILIES	10,000.	WIRE	0.	N/A	N/A
			FOOD PURCHASING AND					
			FOOD BANK TO HOME					
		NORTH AMERICA	PROGRAM	71,000.	 WIRE	0.	N/A	N/A
				,				
		EUROPE (INCLUDING	PROVISION OF BASIC					
		ICELAND &	NECESSITIES FOR 252					
		GREENLAND)	CHILDREN	10,000.	WIRE	0.	N/A	N/A
			COMMUNITY IMPACT AND					
			COMMUNITY INVESTMENT					
		NORTH AMERICA	FUND SUPPORT	71,000.	WIRE	0.	N/A	N/A
			SUPPORT OF WINNIPEG					
			FOLK FESTIVAL TO					
			INCREASE NUMBER OF					
		NORTH AMERICA	DONORS AND SIZE OF	25,000.	WIRE	0.	N/A	N/A
		l	Ī.	l	<u> </u>	I	1	ı

Page 3 Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (h) Method of valuation (book, FMV, appraisal, other) (d) Amount of (f) Amount of (c) Number of (e) Manner of (g) Description of (a) Type of grant or assistance (b) Region recipients cash disbursement noncash assistance cash grant noncash assistance NORTH AMERICA -CANADA AND MEXICO, BUT NOT HARDSHIP ASSISTANCE THE UNITED STATES 12 20,855.WIRE 0.N/A N/A NORTH AMERICA -CANADA AND MEXICO, BUT NOT COLLEGE SCHOLARSHIPS THE UNITED STATES 45,000.WIRE 0.N/A N/A

	1 oreign rorms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes,"		
	the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign		
	Corporation (see Instructions for Form 926)	X Yes	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may		
	be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and		
	Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a		
	U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes."		
•			
	the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to	X Yes	No
	Certain Foreign Corporations (see Instructions for Form 5471)	1es	
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a		
	qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621,		
	Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing		
	Fund (see Instructions for Form 8621)	X Yes	☐ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? // "Yes."		
	the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain		
	Foreign Partnerships (see Instructions for Form 8865)	X Yes	No
	To regit it did not supply (200 modification for 1 of m 0000)		
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If		
	"Yes," the organization may be required to separately file Form 5713, International Boycott Report (see		
	Instructions for Form 5713; don't file with Form 990)	Yes	X No

Page 5

Part V | Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2:

FOR THE CANADIAN GRANTS THE FOUNDATION RELIES ON A SCHOLARSHIP COMMITTEE

IN THE SCHOOL IN CANADA TO GATHER AND ADVERTISE FOR THE SCHOLARSHIP TO

STUDENTS, TAKE APPLICATIONS AND MAKE RECOMMENDATIONS. THE FOUNDATION

RECEIVES THE SCHOLARSHIP RECOMMENDATIONS, AS WELL AS DETAILS OF WHO IS ON

THE COMMITTEE, HOW AND WHERE THE SCHOLARSHIP IS ADVERTISED, AND THE

CONTENTS OF THE ADVERTISEMENT. FOR STUDENTS THAT RECEIVE THE SCHOLARSHIP

THE FOUNDATION REGULARLY REVIEWS TRANSCRIPTS SENT DIRECTLY FROM THE

SCHOOL TO VERIFY THEY ARE IN GOOD STANDING.

FOR GRANTS OUTSIDE OF NORTH AMERICA, THE FOUNDATION HAS LEVERAGED OTHER

COMMUNITY FOUNDATIONS AND A SERVICE PROVIDER NGOSOURCE TO MAKE

EQUIVALENCY DETERMINATIONS.

PART I, LINE 3:

THE FOUNDATION USES THE ACCRUAL METHOD TO REPORT EXPENDITURES.

PART II, COLUMN (D):

REGION: EUROPE (INCLUDING ICELAND & GREENLAND)

(D) PURPOSE OF GRANT: BETTER CHANCE FOR EMPLOYMENT PROGRAM AND SUPPOTING

JOB SEEKING PROFESSIONAL INTEGRATION PROGRAM

REGION: NORTH AMERICA

(D) PURPOSE OF GRANT: SUPPORT OF WINNIPEG FOLK FESTIVAL TO INCREASE

NUMBER OF DONORS AND SIZE OF DONOR GIFTS

SCHEDULE G (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization							ntification number
	POLIS FOUNDATION					41-602940	
Part I Fundraising Activities. required to complete this part	Complete if the organization answet.	ered "Y	es" or	n Form 990, Part IV, li	ine 17	7. Form 990-EZ	filers are not
1 Indicate whether the organization rais	ed funds through any of the followin	g activ	ities. (Check all that apply.			
a Mail solicitations	e Solicitat	tion of	non-g	overnment grants			
b Internet and email solicitations	f Solicitat	tion of	gover	nment grants			
c Phone solicitations	g Special	fundra	aising	events			
d In-person solicitations							
2 a Did the organization have a written of	r oral agreement with any individual	(includ	ling of	ficers, directors, trus	tees,	or	
key employees listed in Form 990, Pa						Yes	
b If "Yes," list the 10 highest paid indiv		ant to	agreei	ments under which th	ne fur	ndraiser is to be)
compensated at least \$5,000 by the	organization.						
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have c or cor contrib	ustody itrol of	(iv) Gross receipts from activity	to (c	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
Гotal			•				
3 List all states in which the organizatio or licensing.	n is registered or licensed to solicit o	contrib	utions	or has been notified	it is e	exempt from re	gistration

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Pa	ırt I	Fundraising Events. Complete if the of fundraising event contributions and great productions.				
		or iditariasing event contributions and give	(a) Event #1 GRAZE4GOOD	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
			(event type)	(event type)	(total number)	col. (c))
ηne			(Oroni typo)	(event type)	(total names)	
Revenue	1	Gross receipts	44,622.			44,622.
	2	Less: Contributions	23,600.			23,600.
	3	Gross income (line 1 minus line 2)	21,022.			21,022.
	4	Cash prizes				
S	5	Noncash prizes				
bense	6	Rent/facility costs				
Direct Expenses	7	Food and beverages	13,571.			13,571.
	8	Entertainment				
	9	Other direct expenses				7,307.
	10	Direct expense summary. Add lines 4 through	n 9 in column (d)		>	20,878.
_		Net income summary. Subtract line 10 from li				144.
Pa	ırt I		answered "Yes" on Form	990, Part IV, line 19, or	reported more than	
		\$15,000 on Form 990-EZ, line 6a.	ı		Г	T
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
_	1	Gross revenue				_
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes % No	Yes % No	Yes % No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)		>	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		>	
а	ls t	ter the state(s) in which the organization conducted the organization licensed to conduct gaming actions." explain:	ctivities in each of these s	states?		Yes No
		ere any of the organization's gaming licenses re Yes," explain:	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · ·		Yes No
4005					Calla	odulo C (Eores 000) 0004
1320	32 10	0-21-21			Sche	edule G (Form 990) 2021

Sch	ledule G (Form 990) 2021 THE MINNEAPOLIS FOUNDATION 41	-6029402	4	Page 3
11	Does the organization conduct gaming activities with nonmembers?	🔲 ነ	Yes	No No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?	. 🔲 ነ	Yes	☐ No
13	Indicate the percentage of gaming activity conducted in:			
a	a The organization's facility	13a		<u>%</u>
	o An outside facility	13b		<u>%</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address			
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	D	Yes	☐ No
k	o If "Yes," enter the amount of gaming revenue received by the organization \$\bigs\\$ and the amount of gaming revenue retained by the third party \$\bigs\\$			
,	If "Yes," enter name and address of the third party:			
•	Too, office that address of the time party.			
	Name			
	Address >			
16	Gaming manager information:			
	Name ▶			
	Coming manager componentian			
	Gaming manager compensation \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
a	a Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	LJ Y	Yes	└─ No
k	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
Da	organization's own exempt activities during the tax year > \$			
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and F	art III, line	es 9, 9	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			

Schedule G	(Form 990) THE MINNEAPOLIS FOUNDATION	41-6029402	Page 4
Part IV	(Form 990) THE MINNEAPOLIS FOUNDATION Supplemental Information (continued)		
	(outlined)		

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

2021
Open to Public Inspection

Schedule I (Form 990) 2021

Name of the organization **Employer identification number** 41-6029402 THE MINNEAPOLIS FOUNDATION Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection 1 X Yes criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of (e) Amount of (g) Description of (h) Purpose of grant valuation (book, or government (if applicable) cash grant noncash noncash assistance or assistance FMV, appraisal, assistance other) RICHARDSON NATURE CENTER 8737 EAST BUSH LAKE ROAD ENVIRONMENT BLOOMINGTON, MN 55438 41-1489848 5,740, 0 PEOPLE'S POTTERY PROJECT 3330 EAGLE ROCK BLVD LOS ANGELES, CA 90065 87-2680630 0. GENERAL 15,000 CHANGE EQUALS OPPORTUNITY 905 W BROADWAY AVE N MINNEAPOLIS, MN 55411 45-2540113 50,000 0 GENERAL ONEMN, ORG 2112 RUSSEL AVENUE NORTH 81-2392014 GENERAL MINNEAPOLIS MN 55411 8 000 0. TORCHES OF THE TWIN CITIES 11510 NEVADA AVENUE SOUTH BLOOMINGTON MN 55438 84-4343399 0. GENERAL 50 000 INTERCULTURAL ALLIANCE LLC 6 PARTRIDGE LANE NORTH OAKS, MN 55127 81-3401458 116 000 0 GENERAL 1,495. 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 11. Enter total number of other organizations listed in the line 1 table

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable cash grant valuation non-cash assistance or assistance noncash (book, FMV, assistance appraisal, other) WELL ROOTED LLC 5532 11TH AVE S MINNEAPOLIS, MN 55417 83-4410888 20,000 0. GENERAL MONTESSORT AMERICAN INDIAN CHILDCARE CENTER - 1909 IVY AVENUE DONOR-RECOMMENDED E. - ST. PAUL, MN 55119 81-4526053 501(C)(3) 12,000 0 EDUCATION PREVENT BLINDNESS AMERICA 225 W WACKER DRIVE STE 400 CHICAGO, IL 60606 36-3667121 501(C)(3) 5,585, 0. HUMAN SERVICES ONEVILLAGE PARTNERS PO BOX 26055 DONOR-RECOMMENDED MINNEAPOLIS, MN 55426 27-3473943 501(C)(3) 30,500, 0 INTERNATIONAL RELATIONS POSITIVE IMAGE 9000 KENTUCKY AVE N 81-0594388 501(C)(3) HUMAN SERVICES BROOKLYN PARK, MN 55445 0. 8,000, POVERELLO CENTER, INC. PO BOX 7644 MISSOULA, MT 59807 23-7439391 501(C)(3) 0. HUMAN SERVICES 42,000 PREGNANCY RESOURCE CENTER OF SOUTHWEST FLORIDA - 9911 CORKSCREW HEALTH RD STE 201 - ESTERO, FL 33928 59-3427729 501(C)(3) 100,000. 0. PREPARE + PROSPER 2610 UNIVERSITY AVENUE WEST, SUITE DONOR-RECOMMENDED, HUMAN ST. PAUL, MN 55114 23-7131829 501(C)(3) 5,500. 0. SERVICES PRESBYTERIAN CLEARWATER FOREST 16595 CROOKED LAKE ROAD DONOR-RECOMMENDED 41-1402122 501(C)(3) RELIGION DEERWOOD, MN 56444 11 000 0.

Schedule I (Form 990)

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) RACHEL'S NETWORK 1200 18TH ST. NW, SUITE 910 DONOR-RECOMMENDED. WASHINGTON, DC 20036 31-1644905 501(C)(3) 14,500 0. ENVIRONMENT REVIVING ISLAMIC SISTERHOOD FOR EMPOWERMENT - 1007 WEST BROADWAY DONOR-RECOMMENDED AVENUE NORTH - MINNEAPOLIS, MN COMMUNITY & ECONOMIC 55411 81-1236990 501(C)(3) 35,250 0 DEVELOPMENT ROCKFORD RESCUE MISSION MINISTRIES PO BOX 1958 ROCKFORD, IL 61110 36-6132381 501(C)(3) 21,205 0. HUMAN SERVICES REGIONAL ACCESS & MOBILIZATION PROJECT - 202 MARKET STREET -36-3149827 501(C)(3) ROCKFORD, IL 61107 10,000. 0 HUMAN RIGHTS RONALD MCDONALD HOUSE CHARITIES OF CENTRAL AND NORTHERN ARIZONA - 501 EAST ROANOKE AVENUE - PHOENIX, AZ 86-0483792 501(C)(3) 0. HEALTH 85004 15,000. RONALD MCDONALD HOUSE OF WESTERN NEW YORK, INC. - 780 W. FERRY ST. - BUFFALO, NY 14222 22-2438932 501(C)(3) 0. HEALTH 25,000 RIDE-ON 4 CARRIE 10213 JEFFERY LN DONOR-RECOMMENDED 82-5280718 501(C)(3) GENERAL ROGERS, MN 55374 7 000. 0. SAHAN JOURNAL 428 MINNESOTA STREET, SUITE 500 DONOR-RECOMMENDED SAINT PAUL, MN 55101 83-2745995 501(C)(3) 59,050. 0. EDUCATION THE CHURCH OF ST. THERESE OF DEEPHAVEN, ST. THERESE SCHOOL -18323 MINNETONKA BLVD - DEEPHAVEN DONOR-RECOMMENDED 41-0790147 501(C)(3) RELIGION MN 55391 7 250. 0.

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) RIDGEVIEW FOUNDATION 500 S MAPLE STREET DONOR-RECOMMENDED. WACONIA, MN 55387 41-1328097 501(C)(3) 21,454 0. PHILANTHROPY PRESBYTERIAN HOMES FOUNDATION 2845 HAMLINE AVENUE NORTH, SUITE 20 ROSEVILLE, MN 55113 41-1465334 501(C)(3) 40,000 0 HUMAN SERVICES RAGAMALA MUSIC AND DANCE THEATER 3754 PLEASANT AVE STE 422W MINNEAPOLIS, MN 55409 41-1747144 501(C)(3) 15,000 0. ARTS & CULTURE RELATE COUNSELING CENTER 5125 COUNTY ROAD 101, SUITE 300 DONOR-RECOMMENDED MINNETONKA, MN 55345 41-0993494 501(C)(3) 10,000. 0 HEALTH NORTH COAST LAND CONSERVANCY PO BOX 67 93-0957815 501(C)(3) 0. ENVIRONMENT SEASIDE, OR 97138 370,500, OROMO COMMUNITY OF MINNESOTA DONOR-RECOMMENDED 465 MACKUBIN ST COMMUNITY & ECONOMIC 41-1727260 501(C)(3) 0. DEVELOPMENT ST. PAUL, MN 55103 12,000 PEACOCK ADDICTION SCHOLARSHIP FOUNDATION - 17462 WEST MOHAVE 84-4785868 501(C)(3) GENERAL STREET - GOODYEAR AZ 85338 15 000 0. PEACE LUTHERAN CHURCH 3695 COUNTY ROAD 101 NORTH DONOR-RECOMMENDED PLYMOUTH, MN 55446 41-1414749 501(C)(3) 25,000. 0. RELIGION PLYMOUTH HARBOR INC 700 JOHN RINGLING BOULEVARD DONOR-RECOMMENDED. SERVICES SARASOTA, FL 34236 59-1031820 501(C)(3) 25 000 0.

Schedule I (Form 990)

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of	(a) Amount of	(f) Method of	(a) Description of	(b) Durnage of great
organization or government	(b) EIN	if applicable	cash grant	(e) Amount of noncash assistance	valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
READY, SET, SMILE							
3751 17TH AVENUE SOUTH							DONOR-RECOMMENDED,
MINNEAPOLIS, MN 55407	46-2229395	501(C)(3)	24,000.	0.			HEALTH
	10 2227070		22,000.	•			
PRODIGY VENTURES, INC							DONOR-RECOMMENDED,
3801 E 40TH AVENUE							COMMUNITY & ECONOMIC
DENVER, CO 80205	47-2745285	501(C)(3)	31,000.	0.			DEVELOPMENT
BLIVER, CO 00203	47 2743203	301(0)(3)	31,000.	•			DEVELOTRENT
RS EDEN							
1931 WEST BROADWAY AVENUE, SUITE 10)						DONOR-RECOMMENDED,
MINNEAPOLIS, MN 55411	41-1948604	501(C)(3)	17,500.	0.			HEALTH
IIIIIIIII ODIB, IIII OOIII	11 1310001	301(0)(3)	17,300.	•			
SABATHANI COMMUNITY CENTER							
310 EAST 38TH STREET, SUITE 200							
MINNEAPOLIS, MN 55409	41-0984859	501(C)(3)	65,500.	0.			HUMAN SERVICES
MINNEM CEIS, IN 33403	41 0304033	501(0)(3)	03,300.	• •			HOMMY BERVICES
RURAL HEALTH CARE INITIATIVE							
PO BOX 14822							
MINNEAPOLIS, MN 55414	45-0766007	501(C)(3)	11,000.	0.			 HEALTH
MINNEALOUIS, PM 33414	45 0700007	501(0)(3)	11,000.	٠.			IIBADIII
RURAL COMMUNITY ALLIANCE							DONOR-RECOMMENDED,
401 S. SCOTT STREET, SUITE 5							COMMUNITY & ECONOMIC
LITTLE ROCK, AR 72201	25-1917387	501/0\/3\	6,000.	0.			DEVELOPMENT
BITTLE ROCK, AR 72201	23-1317307	501(0/(3/	0,000.	0.			DEVELOPMENT
OROMIA RURAL HEALTH INITIATIVE							
6438 13TH AVENUE S							DONOR-RECOMMENDED,
	83-3620405	E01/G\/3\	20,000.	0.			HEALTH
RICHFIELD, MN 55423	83-3020403	501(C)(3)	20,000.	0.			UDALIN
DDO ECCIECTA CANCERA OF MINNECOMA							
PRO ECCLESIA SANCTA OF MINNESOTA							
8650 RUSSELL AVE S	61 1000670	501 (9) (2)	00.000	2			
MINNEAPOLIS, MN 55431	61-1880672	DOT(C)(3)	20,000.	0.			RELIGION
DEDUTE DE 100 MOGRANDO MESTO 0							DOVID DEGOVERNO
REBUILDING TOGETHER TWIN CITIES							DONOR-RECOMMENDED,
1050 SE 33RD AVENUE							COMMUNITY & ECONOMIC
MINNEAPOLIS, MN 55414	41-1893180	501(C)(3)	150,000.	0.			DEVELOPMENT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) RAISE THE BARR 3501 ALDRIDGE AVE S MINNEAPOLIS, MN 55408 81-1234771 501(C)(3) 10,000 0. GENERAL RONALD MCDONALD HOUSE CHARITIES, UPPER MIDWEST - 818 FULTON STREET DONOR-RECOMMENDED. HUMAN SE - MINNEAPOLIS, MN 55414 41-1313107 501(C)(3) 50,707 0 SERVICES RIPPLE EFFECT IMAGES 12110 SUNSET HILLS RD SUITE #600 DONOR-RECOMMENDED RESTON, VA 20190 27-3756018 501(C)(3) 20,250 0. INTERNATIONAL RELATIONS RISEN SAVIOR MISSIONS 14533 EUREKA COURT DONOR-RECOMMENDED, HUMAN 20,000. APPLE VALLEY, MN 55124 41-1990570 501(C)(3) 0 SERVICES ROBBINSDALE WOMEN'S CENTER 3826 WEST BROADWAY DONOR-RECOMMENDED 94-1762082 501(C)(3) ROBBINSDALE, MN 55422 0. HEALTH 7,500. ROCHESTER PHILHARMONIC ORCHESTRA. INC. - 255 EAST AVE. - ROCHESTER. DONOR-RECOMMENDED, ARTS NY 14604 16-0765613 501(C)(3) 0. & CULTURE 12,000 ROSEVILLE LUTHERAN CONGREGATION 1215 ROSELAWN AVE W 41-0745918 501(C)(3) ST. PAUL, MN 55113 25 000 0. EDUCATION ROCHESTER INSTITUTE OF TECHNOLOGY ONE LOMB MEMORIAL DRIVE DONOR-RECOMMENDED ROCHESTER, NY 14623 16-0743140 501(C)(3) 101,000. 0. EDUCATION PRODEO ACADEMY 4141 UNIVERSITY AVENUE NE DONOR-RECOMMENDED 80-0743744 501(C)(3) COLUMBIA HEIGHTS, MN 55421 20 250 0. EDUCATION

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) WALK-IN COUNSELING CENTER 2421 CHICAGO AVENUE S DONOR-RECOMMENDED MINNEAPOLIS, MN 55404 41-0983461 501(C)(3) 21,750 0. HEALTH PROPEL NONPROFITS ONE SE MAIN STREET STE 600 COMMUNITY & ECONOMIC MINNEAPOLIS, MN 55414 41-1916337 501(C)(3) 262,500 0 DEVELOPMENT RAINBOW HEALTH MINNESOTA 2577 TERRITORIAL ROAD DONOR-RECOMMENDED ST. PAUL, MN 55114 41-1524746 501(C)(3) 6,500 0. HEALTH GUSTAVUS ADOLPHUS COLLEGE 800 WEST COLLEGE AVENUE ST. PETER, MN 56082 41-0695524 501(C)(3) 32,029, 0 EDUCATION PATHWAYS 3115 HENNEPIN AVENUE S 41-1628884 501(C)(3) MINNEAPOLIS, MN 55408 0. HEALTH 18,500. ORDWAY CENTER FOR THE PERFORMING ARTS - 345 WASHINGTON STREET - ST. DONOR-RECOMMENDED, ARTS 41-1428998 501(C)(3) 0. & CULTURE PAUL, MN 55102 5,500. NEW YORK CITY PLAYERS 400 W 43RD STREET # 30D 13-4087832 501(C)(3) NEW YORK, NY 10036 10 000 0. ARTS & CULTURE OPPORTUNITY PARTNERS 5500 OPPORTUNITY COURT MINNETONKA, MN 55343 41-0737221 501(C)(3) 69,680. 0. HUMAN SERVICES OUTFRONT MINNESOTA COMMUNITY SERVICES - 310 EAST 38TH STREET. DONOR-RECOMMENDED. HUMAN SUITE 209 - MINNEAPOLIS, MN 55409 36-3550489 501(C)(3) 12,757. 0. RIGHTS

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) GROW GREATER ENGLEWOOD - GETTING GROWN COLLECTIVE - 6620 S UNION AVENUE - CHICAGO, IL 60621 47-2755538 501(C)(3) 15,000 0. ENVIRONMENT QUAD CITIES LATINO FOUNDATION LEAGUE OF UNITED LATIN AMERICAN CITIZENS IOWA - PO BOX 4616 -DAVENPORT, IA 52808 81-1324538 501(C)(3) 10,000 0 ENVIRONMENT GULFSHORE PLAYHOUSE 2640 GOLDEN GATE PARKWAY, SUITE 211 DONOR-RECOMMENDED, ARTS NAPLES, FL 34105 90-0178566 501(C)(3) 54,500 0. & CULTURE PUT ON THE CAPE A FOUNDATION FOR HOPE - 6635 W HAPPY VALLEY RD STE A104-159 - GLENDALE, AZ 85310 83-3278128 501(C)(3) 10,000. 0 HUMAN SERVICES PURPOSE FOR LIFE WORSHIP AND OUTREACH CENTER - P.O.BOX 50182 -82-2172208 501(C)(3) MINNEAPOLIS, MN 55403 0. HUMAN SERVICES 10,000 NORTH AMERICAN TRADITIONAL INDIGENOUS FOOD SYSTEMS - 920 E DONOR-RECOMMENDED LAKE STREET # 107 - MINNEAPOLIS. AGRICULTURE, FISHING & 82-0613944 501(C)(3) 0. FORESTRY MN 55407 6,000 NONVIOLENT PEACEFORCE 2610 UNIVERSITY AVENUE W. SUITE 550 DONOR-RECOMMENDED ST. PAUL, MN 55114 35-2197019 501(C)(3) 13 750 0. INTERNATIONAL RELATIONS NO DOG LEFT BEHIND PO BOX 29461 DONOR-RECOMMENDED BROOKLYN CENTER, MN 55429 45-2953879 501(C)(3) 8,000, 0. ENVIRONMENT NICARAGUAN EDUCATION RESOURCE CENTER - 5824 CLOVER DR - OAKLAND DONOR-RECOMMENDED CA 94618 47-4997229 501(C)(3) 28 450 0. EDUCATION

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable cash grant valuation non-cash assistance or assistance noncash (book, FMV, assistance appraisal, other) OSIRIS ORGANIZATION 1800 COMO AVE, STE 200 DONOR-RECOMMENDED. YOUTH ST. PAUL, MN 55108 41-1879599 501(C)(3) 7,500 0. DEVELOPMENT PARK NICOLLET FOUNDATION 6500 EXCELSIOR BOULEVARD, SUITE 1-5 DONOR-RECOMMENDED ST. LOUIS PARK, MN 55426 23-7346465 501(C)(3) 10,164 0 HEALTH OUR SAVIOUR'S COMMUNITY SERVICES 2315 CHICAGO AVENUE SOUTH MINNEAPOLIS, MN 55404 20-0810105 501(C)(3) 7,440 0. HUMAN SERVICES NEXUS FAMILY HEALING 505 HIGHWAY 169 N. SUITE 500 41-1419064 501(C)(3) 7,100. PLYMOUTH, MN 55441 0 HEALTH GULF COAST LEGAL SERVICES, INC 501 FIRST AVENUE NORTH, SUITE 420 DONOR-RECOMMENDED ST. PETERSBURG, FL 33701 59-1882749 501(C)(3) 0. PUBLIC SAFETY 10,000. PANGEA WORLD THEATER 711 W LAKE STREET STE 101 DONOR-RECOMMENDED, ARTS MINNEAPOLIS, MN 55408 41-1854164 501(C)(3) 0. & CULTURE 55,750 GROWTH AND JUSTICE 970 RAYMOND AVENUE, SUITE 201 DONOR-RECOMMENDED 13-4209510 501(C)(3) PUBLIC AFFAIRS ST. PAUL, MN 55114 9 500. 0. PEASE COMMUNITY FOUNDATION 601 13TH AVENUE SE EDUCATION MINNEAPOLIS, MN 55414 46-3893736 501(C)(3) 15,000. 0. RAIN TAXI DONOR-RECOMMENDED INFORMATION & PO BOX 3840 41-1822994 501(C)(3) MINNEAPOLIS, MN 55403 6 000. 0. COMMUNICATIONS

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) REGIONS HOSPITAL FOUNDATION 640 JACKSON STREET MAIL STOP 11202¢ DONOR-RECOMMENDED ST. PAUL, MN 55101 41-1888902 501(C)(3) 131,913, 0. HEALTH RELATE, INC. 5125 COUNTY ROAD 101, SUITE 300 MINNETONKA, MN 55345 41-0993494 501(C)(3) 20,000 0 неатли REMOTE AREA MEDICAL 2200 STOCK CREEK BOULEVARD ROCKFORD, TN 37853 58-1647546 501(C)(3) 10,000 0. HEALTH RENEWING THE COUNTRYSIDE DONOR-RECOMMENDED 2637 27TH AVENUE SOUTH, SUITE 17 COMMUNITY & ECONOMIC DEVELOPMENT MINNEAPOLIS, MN 55406 20-0189339 501(C)(3) 15,000. 0 RESILIENT RETREAT 1207 SARASOTA CENTER BLVD DONOR-RECOMMENDED 83-1677056 501(C)(3) HEALTH SARASOTA, FL 34231 0. 6,000. RESTART, INC. 918 E 9TH STREET KANSAS CITY, MO 64106 43-1349378 501(C)(3) 0. HUMAN SERVICES 10,000 PORTLAND COMMUNITY FOOTBALL CLUB 1631 NE BROADWAY, SUITE 712 DONOR-RECOMMENDED 46-2073904 501(C)(3) SPORTS & RECREATION PORTLAND, OR 97232 15 000 0. PRG, INC. DONOR-RECOMMENDED 2017 EAST 38TH STREET COMMUNITY & ECONOMIC MINNEAPOLIS, MN 55407 41-1280596 501(C)(3) 40,500. 0. DEVELOPMENT RAINBOW CENTER FOR COMMUNICATIVE DISORDERS - 900 NW WOODS CHAPEL 48-0861861 501(C)(3) ROAD - BLUE SPRINGS, MO 64015 10 000 0. SPORTS & RECREATION

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) OUR SAVIOR LUTHERAN CHURCH 23290 HIGHWAY 7 DONOR-RECOMMENDED EXCELSIOR, MN 55331 41-0874477 501(C)(3) 25,000 0. RELIGION ORONO FOUNDATION FOR EDUCATION PO BOX 211 DONOR-RECOMMENDED LONG LAKE, MN 55356 41-1974305 501(C)(3) 22,500 0 EDUCATION SOUTHEAST ASIA DEVELOPMENT DONOR-RECOMMENDED. PROGRAM, INC. - 1150 WALNUT ST -INFORMATION & NEWTON HIGHLANDS, MA 02461 04-3237647 501(C)(3) 753,000 0. COMMUNICATIONS PAUL SMITHS COLLEGE OF ARTS AND SCIENCES - PO BOX 265 - PAUL DONOR-RECOMMENDED SMITHS, NY 12970 15-0533545 501(C)(3) 10,000. 0 EDUCATION PAUSE 4 PAWS PO BOX 41028 45-2865854 501(C)(3) 0. PLYMOUTH, MN 55441 10,000. ANIMAL RELATED REGENTS OF THE UNIVERSITY OF MICHIGAN - 3003 SOUTH STATE STREET STE 9000 - ANN ARBOR, MI 48109 38-6006309 501(C)(3) 0. EDUCATION 85,892, SAINT MARY'S FOOD BANK 2831 NORTH 31ST AVENUE 23-7353532 501(C)(3) PHOENIX, AZ 85009 30 000 0. HUMAN SERVICES PROPEL NONPROFITS - BRIDGEMAKERS ONE SE MAIN STREET STE 600 COMMUNITY & ECONOMIC MINNEAPOLIS, MN 55414 41-1916337 501(C)(3) 115,000. 0. DEVELOPMENT SIMPSON HOUSING SERVICES, INC. 160 GLENWOOD AVENUE DONOR-RECOMMENDED. 41-1759477 501(C)(3) SERVICES MINNEAPOLIS, MN 55405 317,795. 0.

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) NORTHEASTERN UNIVERSITY 118 CUSHING HALL 360 HUNTINGTON AVE DONOR-RECOMMENDED BOSTON, MA 02115 04-1679980 501(C)(3) 10,000 0. EDUCATION OPPORTUNITY INTERNATIONAL PO BOX 2826 CAROL STREAM, IL 60132 54-0907624 501(C)(3) 35,500 0 INTERNATIONAL RELATIONS OUR LADY OF THE WAYSIDE PARISH & SCHOOL - 432 S. MITCHELL AVE -DONOR-RECOMMENDED ARLINGTON HEIGHTS, IL 60005 36-2275598 501(C)(3) 36,000 0. EDUCATION RUFF START RESCUE PO BOX 129 DONOR-RECOMMENDED PRINCETON, MN 55371 27-2545988 501(C)(3) 0 ENVIRONMENT 17,350, PROJECT SUCCESS-STUDENTS UNDERTAKING CREATIVE CONTROL - ONE GROVELAND TERRACE, SUITE 300 -41-1837278 501(C)(3) MINNEAPOLIS, MN 55403 0. 136,750. HUMAN SERVICES SKIDMORE COLLEGE 815 NORTH BROADWAY, N. HALL DONOR-RECOMMENDED SARATOGA SPRINGS, NY 12866 14-1338562 501(C)(3) 0. EDUCATION 355,500 VIETNAMESE SOCIAL SERVICE OF MINNESOTA - 277 UNIVERSITY AVENUE DONOR-RECOMMENDED, YOUTH 36-3532232 501(C)(3) DEVELOPMENT WEST - SAINT PAUL, MN 55103 32 000 0. SISTERS' CAMELOT PO BOX 7058 DONOR-RECOMMENDED, HUMAN MINNEAPOLIS, MN 55407 41-1901781 501(C)(3) 5,500. 0. SERVICES ST. JUDE CHILDREN'S RESEARCH HOSPITAL - 501 ST. JUDE PLACE -DONOR-RECOMMENDED 62-0646012 501(C)(3) HEALTH MEMPHIS, TN 38105 60 650 0.

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SMILE NETWORK INTERNATIONAL									
PO BOX 3986							DONOR-RECOMMENDED,		
MINNEAPOLIS, MN 55403	90-0088719	501(C)(3)	26,500.	0.			HEALTH		
ST. LOUIS PARK EMERGENCY PROGRAM									
6812 WEST LAKE ST.							 DONOR-RECOMMENDED, HUMAN		
ST. LOUIS PARK, MN 55426	51-0188692	501(C)(3)	10,500.	0.			SERVICES		
SLP SEEDS									
6715 MINNETONKA BOULEVARD, #101							AGRICULTURE, FISHING &		
ST. LOUIS PARK, MN 55426	81-0790793	501(C)(3)	50,000.	0.			FORESTRY		
SON SHINE MINISTRIES									
2506 WOODRIDGE LANE							DONOR-RECOMMENDED,		
BRAINERD, MN 56401	20-3162786	501(C)(3)	15,000.	0.			RELIGION		
SOMALI ARTIFACT AND CULTURAL			,						
MUSEUM - SOOMAAL HOUSE OF ART -									
1516 EAST LAKE STREET #11 -									
MINNEAPOLIS, MN 55407	46-2821976	501(C)(3)	25,700.	0.			ARTS & CULTURE		
OHIO ENVIRONMENTAL COUNCIL									
1145 CHESAPEAKE AVENUE, SUITE I									
COLUMBUS, OH 43212	31-0805578	501(C)(3)	46,000.	0.			ENVIRONMENT		
SOJOURNER PROJECT									
PO BOX 272									
HOPKINS, MN 55343	41-1363580	501(C)(3)	69,500.	0.			PUBLIC SAFETY		
SPOON FOUNDATION									
135 SE MAIN STREET, SUITE 201							DONOR-RECOMMENDED, HUMAN		
PORTLAND, OR 97214	26-0712302	501(C)(3)	41,500.	0.			SERVICES		
SIMON SAYS GIVE									
PO BOX 211172							DONOR-RECOMMENDED, HUMAN		
EAGAN, MN 55121	45-4015006	501(C)(3)	10,000.	0.			SERVICES		

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Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PERSPECTIVES, INC.							
3381 GORHAM AVENUE							DONOR-RECOMMENDED, HUMAN
ST. LOUIS PARK, MN 55426	41-1288300	501(C)(3)	42,250.	0.			SERVICES
ST. CATHERINE UNIVERSITY							
2004 RANDOLPH AVENUE							DONOR-RECOMMENDED,
ST. PAUL, MN 55105	41-0695509	501(C)(3)	80,057.	0.			EDUCATION
PARTNERS IN HEALTH							
PO BOX 996							DONOR-RECOMMENDED,
FREDERICK, MD 21705	04-3567502	501(C)(3)	580,800.	0.			HEALTH
PHI GAMMA DELTA EDUCATIONAL							
FOUNDATION - PO BOX 4599 -							
LEXINGTON, KY 40544	52-6036185	501(C)(3)	80,000.	0.			EDUCATION
NATIONAL COUNCIL OF JEWISH WOMEN -			,,,,,,				
MINNESOTA - 5905 GOLDEN VALLEY							DONOR-RECOMMENDED,
ROAD STE 1 - GOLDEN VALLEY, MN							COMMUNITY & ECONOMIC
55422	41-0675915	501(C)(3)	8,600.	0.			DEVELOPMENT
MINNEAPOLIS INSTITUTE OF ART							
2400 THIRD AVENUE SOUTH							DONOR-RECOMMENDED, ARTS
MINNEAPOLIS, MN 55404	41-0693915	501(C)(3)	334,501.	0.			& CULTURE
WAREHOUSE WORKERS FOR JUSTICE -							
JUST TRANSITION NWI INC - 37 S.							
ASHLAND AVE., FIRST FLOOR -							
CHICAGO, IL 60607	80-0792786	501(C)(3)	10,000.	0.			GENERAL
MINNESOTA AVIATION HALL OF FAME							
PO BOX 2176							DONOR-RECOMMENDED, ARTS
BURNSVILLE, MN 55337	41-1670378	501(C)(3)	7,000.	0.			& CULTURE
VAIL PLACE							
23 9TH AVENUE S							
HOPKINS, MN 55343	41-1394766	501(C)(3)	15,732.	0.			HEALTH

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) ST. BARTHOLOMEW CATHOLIC FAITH COMMUNITY - 630 EAST WAYZATA DONOR-RECOMMENDED BOULEVARD - WAYZATA, MN 55391 41-0711478 501(C)(3) 5,250 0. RELIGION WEST BROADWAY BUSINESS AND AREA COALITION - 1011 W BROADWAY, SUITE COMMUNITY & ECONOMIC 202 - MINNEAPOLIS, MN 55411 41-1985423 501(C)(3) 6,000 0 DEVELOPMENT ST MARTINS BY THE LAKE EPISCOPAL CHURCH - PO BOX 38 - MINNETONKA DONOR-RECOMMENDED BEACH, MN 55361 41-0804992 501(C)(3) 14,000 0. PHILANTHROPY SOCIETY OF THE CINCINNATI 2118 MASSACHUSETTS AVENUE NW DONOR-RECOMMENDED, ARTS WASHINGTON, DC 20008 53-0205423 501(C)(3) 10,000. 0 & CULTURE VALLEY COMMUNITY ASSOCIATION, INC 93 LEDDY STREET 16-0964724 501(C)(3) 0. BUFFALO, NY 14210 39,000. HUMAN SERVICES WALLIN EDUCATION PARTNERS 451 LEXINGTON PKWY N SUITE 100 DONOR-RECOMMENDED 20-8505156 501(C)(3) 0. EDUCATION ST. PAUL, MN 55104 243,440 NEW HAMPSHIRE CHARITABLE FOUNDATION - 37 PLEASANT STREET -CONCORD NH 03301 02-6005625 501(C)(3) 10 000 0. PHILANTHROPY WEST MICHIGAN SUSTAINABLE BUSINESS FORUM - P.O. BOX 68696 - GRAND RAPIDS, MI 49516 26-3787387 501(C)(3) 20,000. 0. GENERAL WEST MICHIGAN ENVIRONMENTAL ACTION COUNCIL - 1007 LAKE DRIVE SE -GRAND RAPIDS, MI 49506 23-7128379 501(C)(3) 46 000 0. ENVIRONMENT

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) WEST CENTRAL INITIATIVE PO BOX 318 DONOR-RECOMMENDED FERGUS FALLS, MN 56538 36-3453471 501(C)(3) 15,000 0. PUBLIC AFFAIRS SOUTHERN OREGON FRIENDS OF HOSPICE 217 S MODOC AVE DONOR-RECOMMENDED, HUMAN MEDFORD, OR 97504 94-3453606 501(C)(3) 0 SERVICES 25,000 SOUTH DAKOTA STATE UNIVERSITY FOUNDATION - 815 MEDARY AVENUE # 525 - BROOKINGS, SD 57006 46-0273801 501(C)(3) 12,500 0. EDUCATION RICE COUNTY AREA UNITED WAY PO BOX 56 NORTHFIELD, MN 55057 41-6025711 501(C)(3) 0 HUMAN SERVICES 6,436. ST. JAMES LUTHERAN CHURCH 6700 46TH PLACE N DONOR-RECOMMENDED 41-0859025 501(C)(3) CRYSTAL, MN 55428 0. RELIGION 28,000, SOUTH BEND MONTESSORI HIGH SCHOOL INC - 333 W COLFAX AVE - SOUTH DONOR-RECOMMENDED 84-2903954 501(C)(3) 0. EDUCATION BEND, IN 46601 7,000. ST. JOHN'S UNIVERSITY 2835 ABBEY PLAZA P.O. BOX 7300 45-3656162 501(C)(3) COLLEGEVILLE MN 56321 81 029 0. EDUCATION ST. JAMES EVANGELICAL LUTHERAN CHURCH - 460 WEST ANNAPOLIS STREET DONOR-RECOMMENDED - WEST ST. PAUL, MN 55118 41-0962701 501(C)(3) 30,000. 0. RELIGION ST. DAVID'S CENTER FOR CHILD AND FAMILY DEVELOPMENT - 3395 PLYMOUTH DONOR-RECOMMENDED ROAD - MINNETONKA, MN 55305 41-1429208 501(C)(3) 104,500. 0. EDUCATION

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) OUESTSCOPE LTD 615 FIRST AVENUE NE STE 500 MINNEAPOLIS, MN 55413 36-3936979 501(C)(3) 25,300 0. INTERNATIONAL RELATIONS QUIONES VICTIMS OF POLICE VIOLENCE RESOURCE COALITION - 8014 OLSON MEMORIAL HWY SUITE 553 - GOLDEN VALLEY, MN 55427 84-3808228 501(C)(3) 15,000 0 GENERAL PROJECT RENEWAL DOMESTIC VIOLENCE INTERVENTION PROGRAM INC - PO BOX 1205 - CONYERS, GA 30012 58-2397407 501(C)(3) 17,000 0. HUMAN SERVICES PROJECT JAMAR SAVING ME, INC. 5353 GAMBLE DR STE 320 DONOR-RECOMMENDED, HUMAN ST. LOUIS PARK, MN 55416 82-3986634 501(C)(3) 0 SERVICES 29,184. PROJECT FOR PRIDE IN LIVING, INC. DONOR-RECOMMENDED 1035 EAST FRANKLIN AVENUE COMMUNITY & ECONOMIC 23-7232208 501(C)(3) DEVELOPMENT MINNEAPOLIS, MN 55404 0. 167,959. PROJECT DRAWDOWN 3450 SACRAMENTO ST. #506 DONOR-RECOMMENDED SAN FRANCISCO, CA 94118 38-3705448 501(C)(3) 0. ENVIRONMENT 25,000 HARLEM CHILDREN'S ZONE, INC. 35 EAST 125TH STREET 23-7112974 501(C)(3) NEW YORK NY 10035 10 000 0. HUMAN SERVICES OPEN CITIES HEALTH CENTER 409 NORTH DUNLAP STREET ST. PAUL, MN 55104 36-3381598 501(C)(3) 20,000. 0. HEALTH PEOPLE SERVING PEOPLE 614 3RD STREET S DONOR-RECOMMENDED. HUMAN SERVICES MINNEAPOLIS, MN 55415 41-1965067 501(C)(3) 43,700. 0.

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable cash grant valuation non-cash assistance or assistance noncash (book, FMV, assistance appraisal, other) MINNEHAHA ACADEMY 4200 W RIVER PKWY MINNEAPOLIS, MN 55406 41-0693870 501(C)(3) 32,725 0. EDUCATION NEW HOPE CENTER 4874 MEYER AVENUE CADILLAC, MI 49601 32-0019736 501(C)(3) 7,500 0 HUMAN SERVICES NEW HOPE ASSEMBLY OF GOD 6800 TOWNSEND AVE DONOR-RECOMMENDED URBANDALE, IA 55032 42-1365308 501(C)(3) 10,000 0. RELIGION NEWHOUSE PO BOX 240019 KANSAS CITY, MO 64124 43-0962293 501(C)(3) 20,000. 0 HUMAN SERVICES NORMANDALE COMMUNITY COLLEGE FOUNDATION - 9700 FRANCE AVENUE 41-1295802 501(C)(3) SOUTH - BLOOMINGTON, MN 55431 0. EDUCATION 5,029. N.C. LITTLE MEMORIAL HOSPICE, INC. 7019 LYNMAR LANE DONOR-RECOMMENDED EDINA, MN 55435 41-1791216 501(C)(3) 0. HEALTH 21,868, THE SANNEH FOUNDATION 2090 CONWAY STREET DONOR-RECOMMENDED. HUMAN 56-2332269 501(C)(3) SERVICES ST. PAUL, MN 55119 53 000. 0. MOUNT SINAI HEALTH SYSTEM ONE GUSTAVE L LEVI PLACE BOX 1049 DONOR-RECOMMENDED NEW YORK, NY 10029 13-6171197 501(C)(3) 21,500. 0. EDUCATION MINNESOTA OPERA 620 NORTH FIRST STREET MINNEAPOLIS, MN 55401 41-0946789 501(C)(3) 51,000. 0. ARTS & CULTURE

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable cash grant valuation non-cash assistance or assistance noncash (book, FMV, assistance appraisal, other) HEALING FLATS 13430 ESSEX CT. DONOR-RECOMMENDED. EDEN PRAIRIE, MN 55347 85-2678869 501(C)(3) 15,000 0. GENERAL NORTHWEST HIGH SCHOOL ALUMNI ASSOCIATION - 4290 GRAVOIS ROAD -DONOR-RECOMMENDED, HUMAN HOUSE SPRINGS, MO 63051 43-1548734 501(C)(3) 20,000 0 SERVICES NORTHERN ILLINOIS FOOD BANK 273 DEARBORN COURT GENEVA, IL 60134 36-3203648 501(C)(3) 20,000 0. HUMAN SERVICES NORTHSIDE RESIDENTS REDEVELOPMENT COUNCIL - 1303 GOLDEN VALLEY ROAD COMMUNITY & ECONOMIC 41-0975381 501(C)(3) - MINNEAPOLIS, MN 55411 25,000. 0 DEVELOPMENT SAINT PAUL & MINNESOTA FOUNDATION 101 5TH STREET E STE 2400 DONOR-RECOMMENDED 41-6031510 501(C)(3) 0. PHILANTHROPY ST. PAUL, MN 55101 172,000. NEW IMPACT FUND 4816 NICOLLET AVENUE DONOR-RECOMMENDED MINNEAPOLIS, MN 55419 46-5187324 501(C)(3) 0. PHILANTHROPY 155,000 CLEAN WISCONSIN 634 WEST MAIN STREET, SUITE 300 39-1413448 501(C)(3) MADISON, WI 53703 42 000. 0. ENVIRONMENT NORTHFIELD SHARES PO BOX 802 DONOR-RECOMMENDED NORTHFIELD, MN 55057 27-3080430 501(C)(3) 48,060. 0. PHILANTHROPY PROVIDENCE ACADEMY 15100 SCHMIDT LAKE ROAD 41-1883866 501(C)(3) PLYMOUTH, MN 55446 30 000 0. EDUCATION

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WARRIORS HEART							
756 PURPLE SAGE ROAD							DONOR-RECOMMENDED, HUMAN
BANDERA, TX 78003	47-4655361	501(C)(3)	10,000.	0.			SERVICES
PACER CENTER							
8161 NORMANDALE BOULEVARD							DONOR-RECOMMENDED, HUMAN
MINNEAPOLIS, MN 55437	41-1306304	501(C)(3)	17,850.	0.			SERVICES
PARK SQUARE THEATRE COMPANY							
20 WEST 7TH PL							DONOR-RECOMMENDED, ARTS
ST. PAUL, MN 55102	41-1280683	501(C)(3)	16,000.	0.			& CULTURE
TRUSTEES OF MOUNT HOLYOKE COLLEGE							
50 COLLEGE STREET							DONOR-RECOMMENDED,
SOUTH HADLEY, MA 01075	04-2103578	501(C)(3)	20,000.	0.			EDUCATION
WISDOM INSTITUTE							
17401 WISCONSIN STREET							
DETROIT, MI 48221	35-2203867	501(C)(3)	10,000.	0.			GENERAL
TIMBERWOOD CHURCH							
23084 STATE HIGHWAY 371							DONOR-RECOMMENDED,
NISSWA, MN 56468	20-0735208	501(C)(3)	30,058.	0.			RELIGION
TRINITY COLLEGE							
300 SUMMIT STREET							
HARTFORD, CT 06106	06-0646927	501(C)(3)	191,100.	0.			EDUCATION
HEAL MIL DEDG TWEEDVAMTOVA							
HEALTH BUILDERS INTERNATIONAL 82 NASSAU STREET #60282							DONOR-RECOMMENDED,
NEW YORK, NY 10038	26-1844856	501(C)(3)	25,000.	0.			HEALTH
In Total, HI 1000	20 1044030	301(0)(3)	25,000.	· ·			
HABITAT FOR HUMANITY BUFFALO, INC.							
1675 SOUTH PARK AVENUE	00.0746655	504 (5) (2)		_			COMMUNITY & ECONOMIC
BUFFALO, NY 14217	22-2746890	DOT(G)(3)	80,000.	0.			DEVELOPMENT

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) WILLMAR JUNIOR GOLF FOUNDATION PO BOX 1612 DONOR-RECOMMENDED WILLMAR, MN 56201 82-1124674 501(C)(3) 35,000 0. SPORTS & RECREATION HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE (MN HILLEL) - 1521 UNIVERSITY AVENUE SE -DONOR-RECOMMENDED MINNEAPOLIS, MN 55414 41-6038613 501(C)(3) 135,250 0 EDUCATION OUR PLACE NASHVILLE 749 GEORGETOWN DRIVE DONOR-RECOMMENDED HUMAN NASHVILLE, TN 37205 47-4044537 501(C)(3) 10,000 0. SERVICES PENUMBRA THEATRE COMPANY 270 NORTH KENT STREET DONOR-RECOMMENDED, ARTS 41-1563764 501(C)(3) 0 & CULTURE ST. PAUL, MN 55102 10,850, NEIGHBORHOOD YOUTH ACADEMY 1505 WASHBURN AVE. N DONOR-RECOMMENDED 61-1697182 501(C)(3) MINNEAPOLIS, MN 55411 0. SPORTS & RECREATION 26,000, MINNESOTA COUNCIL OF CHURCHES 122 WEST FRANKLIN AVENUE, SUITE 100 MINNEAPOLIS, MN 55404 41-0693871 501(C)(3) 0. RELIGION 127,500, MY PIT BULL IS FAMILY 4027 ALDRICH AVE N DONOR-RECOMMENDED 47-2264053 501(C)(3) ENVIRONMENT MINNEAPOLIS, MN 55412 6 041. 0. PROPEL NONPROFITS - 360 IMPACT ONE SE MAIN STREET STE 600 COMMUNITY & ECONOMIC MINNEAPOLIS, MN 55414 41-1916337 501(C)(3) 20,000. 0. DEVELOPMENT NORTHPOINT HEALTH & WELLNESS CENTER, INC. - 1256 PENN AVENUE NORTH, SUITE 5300 - MINNEAPOLIS, 20-0898277 501(C)(3) MN 55411 47 105. 0. HEALTH

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable cash grant valuation non-cash assistance or assistance noncash (book, FMV, assistance appraisal, other) WESTERN RIVERS CONSERVANCY 71 SW OAK STREET, SUITE 100 DONOR-RECOMMENDED PORTLAND, OR 97204 93-1326405 501(C)(3) 50,000 0. ENVIRONMENT WESTMINSTER PRESBYTERIAN CHURCH 1200 MAROUETTE AVE DONOR-RECOMMENDED MINNEAPOLIS, MN 55403 41-0695506 501(C)(3) 146,898 0 RELIGION YOUTH FARM AND MARKET PROJECT 128 WEST 33RD STREET SUITE 2 DONOR-RECOMMENDED HUMAN MINNEAPOLIS, MN 55408 41-1896055 501(C)(3) 7,000 0. SERVICES PATH OF GRACE UNITED METHODIST CHURCH - 759 EAST COUNTY ROAD B -DONOR-RECOMMENDED MAPLEWOOD, MN 55117 41-1298275 501(C)(3) 23,189. 0 RELIGION WILDERNESS INQUIRY 1611 COUNTY ROAD B W STE 315 93-0708637 501(C)(3) ST PAUL, MN 55113 0. ENVIRONMENT 77,750, BETH EL SYNAGOGUE 5225 BARRY STREET WEST ST. LOUIS PARK, MN 55416 41-0711587 501(C)(3) 0. RELIGION 65,500 TEMPLE ISRAEL 2324 EMERSON AVE S DONOR-RECOMMENDED 41-0705807 501(C)(3) RELIGION MINNEAPOLIS, MN 55405 1 275 155. 0. URBAN ROOTS 463 MARIA AVENUE, SUITE 207 DONOR-RECOMMENDED, HUMAN SAINT PAUL, MN 55106 41-0975429 501(C)(3) 12,000. 0. SERVICES LAKE HARRIET UNITED METHODIST CHURCH - 4901 CHOWEN AVENUE SOUTH DONOR-RECOMMENDED RELIGION - MINNEAPOLIS, MN 55410 41-0705791 501(C)(3) 16,721. 0.

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) THE SALVATION ARMY 405 VERMONT STREET QUINCY, IL 62301 36-2167910 501(C)(3) 10,000 0. HUMAN SERVICES VENTURE 511 EAST TRAVELERS TRAIL DONOR-RECOMMENDED BURNSVILLE, MN 55337 41-1720155 501(C)(3) 37,300 0 RELIGION SHEPHERD OF THE DESERT LUTHERAN CHURCH - 9590 E. SHEA BOULEVARD -DONOR-RECOMMENDED SCOTTSDALE, AZ 85260 86-0359152 501(C)(3) 7,500 0. RELIGION NATIONAL PARTNERSHIP FOR WOMEN & FAMILIES - 1875 CONNECTICUT AVE. NW, SUITE 650 - WASHINGTON, DC 20009 23-7124915 501(C)(3) 25,000. 0 HUMAN RIGHTS SHAKOPEE HIGH SCHOOL 100 17TH AVENUE WEST DONOR-RECOMMENDED 61-1731975 501(C)(3) 0. EDUCATION SHAKOPEE, MN 55379 6,000. THE GRIEF CLUB OF MINNESOTA 11985 TECHNOLOGY DRIVE SUITE 250 DONOR-RECOMMENDED EDEN PRAIRIE, MN 55344 85-2876693 501(C)(3) 0. HEALTH 52,000 THE FAMILY PARTNERSHIP 414 SOUTH EIGHTH STREET 41-0693858 501(C)(3) MINNEAPOLIS, MN 55404 136,491 0. HUMAN SERVICES THE CONSTELLATION FUND 729 N. WASHINGTON AVENUE, SUITE 600 MINNEAPOLIS, MN 55401 82-4027046 501(C)(3) 428,400. 0. PHILANTHROPY MINNPOST DONOR-RECOMMENDED INFORMATION & P.O. BOX 18438 26-0573427 501(C)(3) COMMUNICATIONS MINNEAPOLIS, MN 55418 77 825. 0.

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NC RURAL CENTER							DONOR-RECOMMENDED,
4021 CARYA DRIVE							COMMUNITY & ECONOMIC
RALEIGH, NC 27610	56-1552375	501(C)(3)	12,000.	0.			DEVELOPMENT
UJAMAA PLACE							
1821 UNIVERSITY AVENUE, SUITE N187							DONOR-RECOMMENDED, HUMAN
ST. PAUL, MN 55104	27-1216065	501(C)(3)	29,000.	0.			SERVICES
UBUNTU CARES							
7800 METRO PARKWAY							
BLOOMINGTON, MN 55425	85-0931828	501(C)(3)	175,500.	0.			HUMAN SERVICES
NATUREBRIDGE							
1033 FORT CRONKHITE							DONOR-RECOMMENDED,
SAUSALITO, CA 94965	94-2145930	501(C)(3)	20,000.	0.			ENVIRONMENT
THE CARTER EDUCATION & COMMUNITY							
FOUNDATION, INC 3833 KINGSWAY							DONOR-RECOMMENDED, HUMAN
DRIVE - CROWN POINT, IN 46307	86-2066654	501(C)(3)	8,000.	0.			SERVICES
TWIN CITIES RISE							
PO BOX 11459							COMMUNITY & ECONOMIC
MINNEAPOLIS, MN 55411	41-1761118	501(C)(3)	108,800.	0.			DEVELOPMENT
NATIVE FISH SOCIETY							
813 SEVENTH STREET, SUITE 200A							DONOR-RECOMMENDED,
OREGON CITY, OR 97045	93-1187474	501(C)(3)	50,000.	0.			ENVIRONMENT
<u> </u>	30 110/1/1			•			
THE LOFT LITERARY CENTER							DONOR-RECOMMENDED,
1011 WASHINGTON AVENUE SOUTH, SUIT	[E						INFORMATION &
MINNEAPOLIS, MN 55415	41-1297735	501(C)(3)	6,750.	0.			COMMUNICATIONS
TWIN CITIES INTERNATIONAL FILM							
FESTIVAL - 1649 ALABAMA AVENUE							DONOR-RECOMMENDED, ARTS
SOUTH - ST. LOUIS PARK, MN 55416	26-4185895	501(C)(3)	37,500.	0.			& CULTURE

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) TUBMAN 4432 CHICAGO AVENUE DONOR-RECOMMENDED. HUMAN MINNEAPOLIS, MN 55407 41-1240048 501(C)(3) 10,075 0. SERVICES SHARING OUR ROOTS DONOR-RECOMMENDED 105 EAST 4TH STREET, SUITE 213 COMMUNITY & ECONOMIC NORTHFIELD, MN 55057 20-1788275 501(C)(3) 55,000 0 DEVELOPMENT NEIGHBORHOOD HEALTHSOURCE 3300 FREMONT AVENUE NORTH MINNEAPOLIS, MN 55412 41-1235064 501(C)(3) 30,500 0. HEALTH UNIVERSITY OF WASHINGTON FOUNDATION - 4333 BROOKLYN AVENUE NORTHEAST - SEATTLE, WA 98195 94-3079432 501(C)(3) 15,000. 0 EDUCATION VISION LOSS RESOURCES 1936 LYNDALE AVENUE SOUTH 41-0694713 501(C)(3) MINNEAPOLIS, MN 55403 0. HEALTH 6,598. THESSALONICA AGRICULTURAL & INDUSTRIAL INSTITUTE - 800 3RD AVENUE, SUITE 2800 - NEW YORK, NY 10022 13-1624206 501(C)(3) 0. INTERNATIONAL RELATIONS 25,000 THE UPTAKE INSTITUTE 1041 GRAND AVENUE, SUITE 354 DONOR-RECOMMENDED 26-3781377 501(C)(3) GENERAL SAINT PAUL, MN 55105 7 500. 0. DONOR-RECOMMENDED, THERESA LIVING CENTER 917 JESSAMINE AVENUE E COMMUNITY & ECONOMIC ST. PAUL, MN 55106 36-3534647 501(C)(3) 10,500. 0. DEVELOPMENT THERE WITH CARE 2825 WILDERNESS PLACE, SUITE 100 DONOR-RECOMMENDED. SERVICES BOULDER, CO 80301 68-0606330 501(C)(3) 10 000. 0.

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) BREAKTHROUGH TWIN CITIES 2051 LARPENTEUR AVENUE EAST DONOR-RECOMMENDED ST. PAUL, MN 55109 45-3587267 501(C)(3) 5,010 0. EDUCATION BOYS AND GIRLS CLUB OF CEDAR RAPIDS - 420 6TH ST SE STE 240 -CEDAR RAPIDS, IA 52401 42-1434056 501(C)(3) 20,000 0 HUMAN SERVICES CADDIE U 200 SOUTHDALE CENTER DONOR-RECOMMENDED, HUMAN EDINA, MN 55435 82-4276091 501(C)(3) 8,500 0. SERVICES ACADEMY OF HOLY ANGELS 6600 NICOLLET AVENUE SOUTH DONOR-RECOMMENDED RICHFIELD, MN 55423 41-0696903 501(C)(3) 50,500, 0 EDUCATION ANNANDALE COMMUNITY FOODSHELF DONOR-RECOMMENDED PO BOX 94 AGRICULTURE, FISHING & 36-3297409 501(C)(3) 0. FORESTRY ANNANDALE, MN 55302 7,000. BUILD WEALTH MINNESOTA, INC 2121 PLYMOUTH AVENUE NORTH MINNEAPOLIS, MN 55411 25-1918239 501(C)(3) 0. EDUCATION 14,900. ANTI-DEFAMATION LEAGUE 605 THIRD AVENUE 13-1818723 501(C)(3) NEW YORK, NY 10158 59 000. 0. HUMAN RIGHTS ANN BANCROFT FOUNDATION 2356 UNIVERSITY AVENUE WEST SUITE ST. PAUL, MN 55114 41-1691868 501(C)(3) 25,500. 0. HUMAN SERVICES BOYS AND GIRLS CLUB OF GREATER MILWAUKEE, INC. - 1558 N 6TH STREET - MILWAUKEE, WI 53212 39-0806292 501(C)(3) 10 000. 0. HUMAN SERVICES

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable cash grant valuation non-cash assistance or assistance noncash (book, FMV, assistance appraisal, other) SYNERGY SERVICES, INC. 400 E. 6TH STREET PARKVILLE, MO 64152 43-0970674 501(C)(3) 10,000 0. HUMAN SERVICES COMPAS, INC. 475 CLEVELAND AVENUE, SUITE 222 DONOR-RECOMMENDED, ARTS ST. PAUL, MN 55104 41-1228092 501(C)(3) 9,360 0 & CULTURE METROPOLITAN ECONOMIC DEVELOPMENT ASSOCIATION - 1256 PENN AVENUE DONOR-RECOMMENDED NORTH, SUITE 4800 - MINNEAPOLIS, COMMUNITY & ECONOMIC MN 55411 41-0977257 501(C)(3) 61,000 0. DEVELOPMENT FACE IT FOUNDATION 3550 LEXINGTON AVE N SUITE 106 DONOR-RECOMMENDED 14,000. SHOREVIEW, MN 55126 27-1391950 501(C)(3) 0 EDUCATION GIVING DUPAGE 421 N. COUNTY FARM ROAD DONOR-RECOMMENDED 26-2696088 501(C)(3) WHEATON, IL 60187 0. PHILANTHROPY 10,000. FAITH, HOPE AND LOVE GLOBAL MINISTRIES - 3001 BROADWAY STREET NE, SUITE 640 - MINNEAPOLIS, MN DONOR-RECOMMENDED 55413 35-2327343 501(C)(3) 0. RELIGION 12,500 COMPASSION INTERNATIONAL 12290 VOYAGER PARKWAY DONOR-RECOMMENDED 36-2423707 501(C)(3) COLORADO SPRINGS, CO 80921 8 000 0. INTERNATIONAL RELATIONS CITIZENS LEAGUE 400 ROBERT STREET NORTH, SUITE 1820 DONOR-RECOMMENDED ST. PAUL, MN 55101 41-0722696 501(C)(3) 36,800. 0. PUBLIC AFFAIRS ST. PAUL NEIGHBORHOOD NETWORK 550 VANDALIA ST STE 170 41-1500773 501(C)(3) SAINT PAUL, MN 55114 22 000 0. ARTS & CULTURE

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOOLPROOF FOUNDATION, INC.							
516 DELANNOY AVE							DONOR-RECOMMENDED,
COCOA, FL 32922	46-2102687	501(C)(3)	20,000.	0.			PUBLIC SAFETY
ERNEST C. OBERHOLTZER FOUNDATION 12697 NORTH 177TH STREET	41 (042(10	F01/G)/2)	15.000	0			DONOR-RECOMMENDED,
MARINE ON ST. CROIX, MN 55047	41-6042619	501(C)(3)	15,000.	0.			PHILANTHROPY
MINDEKIRKEN - NORWEGIAN LUTHERAN MEMORIAL CHURCH - 924 EAST 21ST STREET - MINNEAPOLIS, MN 55404	27-1141552	501(C)(3)	5,048.	0.			RELIGION
			-,				
FOUNDATION OF DISTRICT 304 2031 HOSPITAL DRIVE SEDRO-WOOLLEY, WA 98284	46-1035355	501(C)(3)	15,000.	0.			COMMUNITY & ECONOMIC DEVELOPMENT
A GREAT DAY FARM FOUNDATION 5575 115TH STREET EAST							DONOR-RECOMMENDED HUMAN
NORTHFIELD, MN 55057	46-4272037	501(C)(3)	30,000.	0.			SERVICES
FAMILY HOUSING FUND 310 4TH AVENUE SOUTH, SUITE 9000 MINNEAPOLIS, MN 55415	41-1380923	501(C)(3)	50,750.	0.			DONOR-RECOMMENDED, HUMAN SERVICES
THE GILLESPIE CENTER 2590 COMMERCE BOULEVARD							
MOUND, MN 55364	41-1617933	501(C)(3)	60,211.	0.			HUMAN SERVICES
MERCY MEDICAL CENTER CEDAR RAPIDS IOWA ENDOWMENT FOUNDATION, INC 701 10TH STREET SE - CEDAR RAPIDS,							
IA 52403	51-0233180	501(C)(3)	20,000.	0.			PHILANTHROPY
CHRIST THE KING EVANGELICAL LUTHERAN CHURCH FOUNDATION OF NEW BRIGHTON - 1900 7TH STREET NW -	22 323230	(3)	23,300.				
NEW BRIGHTON, MN 55112	41-1642466	501(C)(3)	100,000.	0.			RELIGION

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) AL-MAA'UUN 1729 LYNDALE AVENUE NORTH MINNEAPOLIS, MN 55411 27-1893708 501(C)(3) 201,000 0. HUMAN SERVICES BOYS AND GIRLS CLUBS OF THE VALLEY 4309 E. BELLEVIEW STREET PHOENIX, AZ 85008 86-0550646 501(C)(3) 100,000 0 HUMAN SERVICES A SOLDIER'S CHILD INC. P.O. BOX 11242 MURFREESBORO, TN 37129 26-3032468 501(C)(3) 25,000 0. HUMAN SERVICES GLOBAL TEEN CHALLENGE PO BOX 511 DONOR-RECOMMENDED, HUMAN COLUMBUS, GA 31902 59-3302759 501(C)(3) 10,500. 0 SERVICES HOSPITALITY HOUSE YOUTH DEVELOPMENT - PO BOX 11008 -DONOR-RECOMMENDED. HUMAN 41-0858664 501(C)(3) 0. SERVICES MINNEAPOLIS, MN 55411 19,211. ADVENTIVE CROSS CULTURAL INITIATIVES - 239 HAMPTON STREET DONOR-RECOMMENDED ROCK HILL, SC 29730 72-1588721 501(C)(3) 0. RELIGION 10,000 HOPE COMMUNITY 611 EAST FRANKLIN AVENUE DONOR-RECOMMENDED. HUMAN 41-1292817 501(C)(3) SERVICES MINNEAPOLIS, MN 55404 94 250. 0. LUNDSTRUM CENTER FOR THE PERFORMING ARTS - 1617 NORTH SECOND STREET - MINNEAPOLIS, MN DONOR-RECOMMENDED, ARTS 55411 41-1972424 501(C)(3) 9,750. 0. & CULTURE COLLEGE POSSIBLE 755 PRIOR AVENUE NORTH, SUITE 200 DONOR-RECOMMENDED EDUCATION ST. PAUL, MN 55104 41-1968798 501(C)(3) 40 300 0.

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) ISAIAH DONOR-RECOMMENDED 2356 UNIVERSITY AVENUE WEST, SUITE COMMUNITY & ECONOMIC ST. PAUL, MN 55114 41-1957358 501(C)(3) 53,500 0. DEVELOPMENT INTERNATIONAL JUSTICE MISSION PO BOX 96961 DONOR-RECOMMENDED. HUMAN WASHINGTON, DC 20090 54-1722887 501(C)(3) 0 RIGHTS 16,500 INTERNATIONAL ASSOCIATION FOR HUMAN VALUES - 2401 15TH STREET NW - WASHINGTON, DC 20009 52-2178069 501(C)(3) 15,000 0. HUMAN SERVICES BOUNTIFIELD INTERNATIONAL 729 N. WASHINGTON AVE., SUITE 600 DONOR-RECOMMENDED MINNEAPOLIS, MN 55401 41-1400421 501(C)(3) 0 INTERNATIONAL RELATIONS 5,500. INTERGROUP ASSOCIATION OF MINNEAPOLIS - 7204 WEST 27TH ST. SUITE 113 - ST. LOUIS PARK, MN 41-0947100 501(C)(3) 0. EDUCATION 55426 5,210, INTERFAITH OUTREACH AND COMMUNITY PARTNERS - 1605 COUNTY ROAD 101 N DONOR-RECOMMENDED. HUMAN - PLYMOUTH, MN 55447 36-3482724 501(C)(3) 0. SERVICES 145,660 INTERFAITH ACTION OF GREATER ST. PAUL - 1671 SUMMIT AVENUE - ST. DONOR-RECOMMENDED. HUMAN 41-0694741 501(C)(3) RIGHTS PAUL MN 55105 17 000. 0. INTERNATIONAL MEDICAL CORPS 1919 SANTA MONICA BOULEVARD #400 DONOR-RECOMMENDED SANTA MONICA, CA 90404 95-3949646 501(C)(3) 10,250, 0. INTERNATIONAL RELATIONS INVEST APPALACHIA INC 1456 D PATTON AVENUE DONOR-RECOMMENDED ASHEVILLE, NC 28803 84-2748180 501(C)(3) 12 000 0. ENVIRONMENT

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
HIGH TECH KIDS 3370 COACHMAN ROAD SUITE D EAGAN, MN 55121	41-1959073	501(C)(3)	11,300.	0.			HUMAN SERVICES		
MISSOULA FOOD BANK & COMMUNITY CENTER - 1720 WYOMING ST - MISSOULA, MT 59801	81-0414143	501(C)(3)	46,000.	0.			DONOR-RECOMMENDED, HUMAN SERVICES		
FRIENDS OF THOMAS LOWRY PARK 1776 COLFAX AVENUE SOUTH MINNEAPOLIS, MN 55403	26-3163274	501(C)(3)	10,000.	0.			DONOR-RECOMMENDED, COMMUNITY & ECONOMIC DEVELOPMENT		
CAMPUS CRUSADE FOR CHRIST 100 LAKE HART DRIVE, #2400 ORLANDO, FL 32832	95-6006173	501(C)(3)	5,500.	0.			DONOR-RECOMMENDED, RELIGION		
MINNESOTA HOUSING PARTNERSHIP 2446 UNIVERSITY AVENUE WEST, SUITE ST. PAUL, MN 55114	41-1649643	501(C)(3)	25,000.	0.			HOUSING & SHELTER		
MINNESOTA EDUCATION EQUITY PARTNERSHIP - 2233 UNIVERSITY AVENUE W STE 220 - ST. PAUL, MN 55114	41-1699505	501(C)(3)	54,000.	0.			EDUCATION		
THE JUNCTION COALITION 419 JUNCTION AVE. TOLEDO, OH 43607	81-1449842	501(C)(3)	10,000.	0.			GENERAL		
THE JOHNS HOPKINS UNIVERSITY 3400 N. CHARLES STREET SAN MARTIN (BALTIMORE, MD 21218	52-0595110	501(C)(3)	10,000.	0.			DONOR-RECOMMENDED, EDUCATION		
MIXED BLOOD THEATRE COMPANY 1501 SOUTH FOURTH STREET MINNEAPOLIS, MN 55454	41-1377499	501(C)(3)	14,801.	0.			DONOR-RECOMMENDED, ARTS & CULTURE		

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) MAIN STREET JOPLIN 931 E 4TH STREET JOPLIN, MO 64801 43-1561015 501(C)(3) 17,500 0. HUMAN SERVICES HENNEPIN TECHNICAL COLLEGE FOUNDATION - 9000 BROOKLYN BOULEVARD - BROOKLYN PARK, MN DONOR-RECOMMENDED 55445 41-1943149 501(C)(3) 26,000 0 EDUCATION MISSION ANIMAL HOSPITAL 10100 VIKING DRIVE STE 150 EDEN PRAIRIE, MN 55344 47-2606680 501(C)(3) 38,001 0. ENVIRONMENT MOMS & NEIGHBORS PO BOX 235 DONOR-RECOMMENDED ROSEMOUNT, MN 55068 27-2290512 501(C)(3) 12,000. 0 PHILANTHROPY MODERN CLASSROOMS 15 14TH ST SE 82-5421304 501(C)(3) 0. GENERAL WASHINGTON, DC 20003 50,000, MOBILITY WORLDWIDE 10670 LANCASTER LN N DONOR-RECOMMENDED. HUMAN MAPLE GROVE, MN 55369 86-1128278 501(C)(3) 0. SERVICES 24,288, MID-AMERICAN BAPTIST CHURCHES 2400 86TH STREET STE 15 42-0703272 501(C)(3) 0. DES MOINES, IA 50322 10 391. RELIGION FRIENDS OF UNISTREAM, INC. -NETWORK FOR TEACHING ENTREPRENEURSHIP - 4041 D HADLEY COMMUNITY & ECONOMIC ROAD SUITE 101 - SOUTH 20-8156478 501(C)(3) 10,000. 0. DEVELOPMENT MIZNA 2446 UNIVERSITY AVENUE W. SUITE 115 ST. PAUL, MN 55114 41-1913423 501(C)(3) 500 000. 0. ARTS & CULTURE

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable cash grant valuation non-cash assistance or assistance noncash (book, FMV, assistance appraisal, other) MIDTOWN GREENWAY COALITION DONOR-RECOMMENDED 2834 10TH AVENUE SOUTH, SUITE 2 COMMUNITY & ECONOMIC MINNEAPOLIS, MN 55407 41-1825584 501(C)(3) 6,000 0. DEVELOPMENT BESTPREP 7100 NORTHLAND CIRCLE NORTH, SUITE DONOR-RECOMMENDED. HUMAN BROOKLYN PARK, MN 55428 41-1265355 501(C)(3) 0 SERVICES 21,650 BEL13VE IN MIRACLES FOUNDATION 1820 OLD HIGHWAY 8 NW STE 13 DONOR-RECOMMENDED NEW BRIGHTON, MN 55112 46-1604364 501(C)(3) 30,500 0. PHILANTHROPY BEREAN BAPTIST CHURCH 309 EAST COUNTY ROAD 42 DONOR-RECOMMENDED BURNSVILLE, MN 55306 41-1224849 501(C)(3) 12,500. 0 RELIGION MAPLE GROVE ROTARY FOUNDATION PO BOX 1831 DONOR-RECOMMENDED 41-1884851 501(C)(3) 0. PHILANTHROPY MAPLE GROVE, MN 55311 7,000. IMMEDIATE LIFE INC PO BOX 1556 DONOR-RECOMMENDED, ARTS NEW YORK, NY 10013 02-0682988 501(C)(3) 0. & CULTURE 38,000 IMARA INTERNATIONAL PO BOX 41460 DONOR-RECOMMENDED. HUMAN 45-4795423 501(C)(3) SERVICES PLYMOUTH, MN 55441 8 000. 0. JEWISH THEOLOGICAL SEMINARY OF AMERICA - 3080 BROADWAY - NEW YORK, NY 10027 13-0887640 501(C)(3) 12,500. 0. EDUCATION BENEDICTINE COLLEGE 1020 NORTH 2ND STREET DONOR-RECOMMENDED ATCHISON, KS 66002 48-0777079 501(C)(3) 5 500. 0. EDUCATION

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Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	r uge
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LAKE MINNETONKA ASSOCIATION							
PO BOX 248							DONOR-RECOMMENDED,
EXCELSIOR, MN 55331	41-1878169	501(C)(3)	6,800.	0.			ENVIRONMENT
MERCY HEALTH FOUNDATION NORTHWEST ARKANSAS - 2710 S RIFE MEDICAL	71 0001007	E01/G)/2)	27,000				
LANE - ROGERS, AR 72758	71-0601687	501(C)(3)	27,000.	0.			HEALTH
BET SHALOM CONGREGATION 13613 ORCHARD ROAD MINNETONKA, MN 55305	41-1409208	501(C)(3)	16,294.	0.			DONOR-RECOMMENDED, RELIGION
MERCY CENTER 2300 ADELINE DRIVE BURLINGAME, CA 94010	94-6071848	501(C)(3)	10,000.	0.			DONOR-RECOMMENDED, RELIGION
GERMANIC AMERICAN INSTITUTE 301 SUMMIT AVENUE ST. PAUL, MN 55102	41-6025383	501(C)(3)	200,250.	0.			DONOR-RECOMMENDED, ARTS
KRAMDEN INSTITUTE INC 5010 NC HWY 55 DURHAM, NC 27713	74-3108814		22,150.	0.			SCIENCE
KINDLEHOUSE 7402 OAKLAWN AVE EDINA, MN 55435	86-1192100	501(C)(3)	27,500.	0.			DONOR-RECOMMENDED, RELIGION
KEYSTONE COMMUNITY SERVICES 2000 ST. ANTHONY AVENUE ST. PAUL, MN 55104	41-0693924	501(C)(3)	11,000.	0.			HUMAN SERVICES
KENYA HOPE AND HELP 320 HOLLYBERRY LANE BOULDER, CO 80305	84-2254025	501(C)(3)	80,000.	0.			GENERAL

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
KENAN-FLAGLER BUSINESS SCHOOL								
FOUNDATION - 300 KENAN CENTER								
DRIVE, CB#3440 - CHAPEL HILL, NC	56 0001050	F01/G)/2)	10.000	_			DONOR-RECOMMENDED,	
27599	56-0771850	501(C)(3)	12,000.	0.			EDUCATION	
GROVELAND EMERGENCY FOOD SHELF INC								
1900 NICOLLET AVENUE							DONOR-RECOMMENDED, HUMAN	
MINNEAPOLIS, MN 55403	41-1933266	501(C)(3)	12,250.	0.			SERVICES	
GEORGE A SPIVA CENTER FOR THE ARTS								
222 W 3RD STREET								
JOPLIN, MO 64801	44-6006139	501(C)(3)	10,250.	0.			ARTS & CULTURE	
JUVENILE DIABETES RESEARCH							DONOR REGOVERNDED	
FOUNDATION - 200 VESEY STREET 28TH	22 1007720	E01/G)/2)	152 750				DONOR-RECOMMENDED,	
FLOOR - NEW YORK, NY 10281	23-1907729	501(C)(3)	153,750.	0.			HEALTH	
LEGACY OF THE LAKES MUSEUM AND								
GARDENS - PO BOX 1216 -							DONOR-RECOMMENDED, ARTS	
ALEXANDRIA, MN 56308	41-1967683	501(C)(3)	15,500.	0.			& CULTURE	
GIRL SCOUTS OF MINNESOTA AND								
WISCONSIN RIVER VALLEYS - 400								
ROBERT STREET SOUTH - ST. PAUL, MN							DONOR-RECOMMENDED, HUMAN	
55107	41-0693910	501(C)(3)	36,421.	0.			SERVICES	
ENCOUNTER PROGRAMS								
8 W 126TH STREET, FLOOR 3							DONOR-RECOMMENDED,	
NEW YORK, NY 10027	26-0593832	501(C)(3)	10,360.	0.			EDUCATION	
NUM TORRY, NT 10027	20 0333032	301(0)(3)	10,300.	· ·			EDUCATION	
EVANGELICAL LUTHERAN CHURCH IN								
AMERICA - PO BOX 71764 - CHICAGO,							DONOR-RECOMMENDED,	
IL 60631	41-1568278	501(C)(3)	16,450.	0.			RELIGION	
FEEDING AMERICA WEST MICHIGAN								
864 W RIVER CENTER DRIVE	20 2420650	E01/G\/3\	21 000	_			HIMAN GERVICES	
COMSTOCK PARK, MI 49321	38-2439659	DOT(C)(3)	21,000.	0.			HUMAN SERVICES	

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable cash grant valuation non-cash assistance or assistance noncash (book, FMV, assistance appraisal, other) LORD OF LIFE LUTHERAN CHURCH 7401 COUNTY ROAD 101 DONOR-RECOMMENDED MAPLE GROVE, MN 55311 41-1339167 501(C)(3) 20,100 0. RELIGION GREATER METROPOLITAN HOUSING CORPORATION - 15 SOUTH FIFTH STREET, SUITE 710 - MINNEAPOLIS, COMMUNITY & ECONOMIC MN 55402 41-0968007 501(C)(3) 15,000 0 DEVELOPMENT FRANK THEATRE 3156 23RD AVENUE SOUTH DONOR-RECOMMENDED, ARTS MINNEAPOLIS, MN 55407 41-1677750 501(C)(3) 10,500 0. & CULTURE FOUNDATIONS FOR A BETTER OREGON 123 NE 3RD AVE STE 208 DONOR-RECOMMENDED PORTLAND, OR 97232 42-1606106 501(C)(3) 12,000. 0 EDUCATION GLORIA DEI LUTHERAN CHURCH 310 W ELIZABETH STREET 83-1094667 501(C)(3) 0. RELIGION TOMAH, WI 54660 15,550. GREAT NORTHERN WINTER FESTIVAL 3754 PLEASANT AVE, SUITE 420W MINNEAPOLIS, MN 55409 81-5138735 501(C)(3) 0. ARTS & CULTURE 77,000 FOOD BANK OF IOWA 2220 E 17TH STREET DES MOINES, IA 50316 42-1177880 501(C)(3) 7 500. 0. HUMAN SERVICES FREE BIKES 4 KIDZ 10914 LEXINGTON DRIVE DONOR-RECOMMENDED, HUMAN EDEN PRAIRIE, MN 55344 27-1199089 501(C)(3) 21,058. 0. SERVICES GEAR ALLIANCE, INC. 950 S. SHERMAN STREET DONOR-RECOMMENDED GENERAL LONGMONT, CO 80501 47-4256501 501(C)(3) 20 000 0.

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable cash grant valuation non-cash assistance or assistance noncash (book, FMV, assistance appraisal, other) EVART ELEMENTARY SCHOOL 515 N CEDAR STREET EVART, MI 49338 38-6003211 GOVERNMENT 16,000 0. EDUCATION HANNIBAL SCHOOL DISTRICT #60 4650 MCMASTERS AVENUE HANNIBAL, MO 63401 43-6001555 GOVERNMENT 18,400 0 EDUCATION SPECIAL SCHOOL DISTRICT NO. 1 1250 WEST BROADWAY AVENUE DONOR-RECOMMENDED MINNEAPOLIS, MN 55411 41-0851980 GOVERNMENT 8,000 0. EDUCATION CITY OF MINNEAPOLIS 350 SOUTH 5TH STREET ROOM 325 M MINNEAPOLIS, MN 55415 41-6005375 GOVERNMENT 21,620. 0 PUBLIC AFFAIRS MORLEY STANWOOD ELEMENTARY SCHOOL 4808 NORTHLAND DRIVE 38-6031979 GOVERNMENT 0. EDUCATION MORLEY, MI 49336 7,800. ROOSEVELT HIGH SCHOOL 4029 28TH AVENUE SOUTH DONOR-RECOMMENDED MINNEAPOLIS, MN 55406 41-0851980 GOVERNMENT 0. EDUCATION 10,000 OAKLAND UNIFIED SCHOOL DISTRICT THE CENTER 285 94-6000385 GOVERNMENT OAKLAND, CA 94608 43 250. 0. HUMAN SERVICES ALEXANDER LOCAL SCHOOLS 6091 AYERS ROAD ALBANY, OH 45710 31-0677934 GOVERNMENT 10,000. 0. EDUCATION CARLISLE PUBLIC LIBRARY INFORMATION & PO BOX S CARLISLE, IA 50047 42-6004318 GOVERNMENT 6,500. 0. COMMUNICATIONS

Schedule I (Form 990)

Part II Continuation of Grants and Other A	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YLVESTER MEMORIAL WELLSTON PUBLIC							
LIBRARY - 135 EAST 2ND STREET -							INFORMATION &
WELLSTON, OH 45692	31-6402544	GOVERNMENT	15,000.	0.			COMMUNICATIONS
WELLSTON CITY SCHOOLS ONE E BROADWAY							
WELLSTON, OH 45692	31-6401103	GOVERNMENT	24,500.	0.			EDUCATION
NEWTON COUNTY SCHOOL SYSTEM 2109 NEWTON DRIVE COVINGTON, GA 30014	58-6000295	GOVERNMENT	8,000.	0.			COMMUNITY & ECONOMIC DEVELOPMENT
PATRICK HENRY HIGH SCHOOL 4320 NEWTON AVENUE NORTH							DONOR-RECOMMENDED,
MINNEAPOLIS, MN 55412	41-0851980	GOVERNMENT	10,000.	0.			EDUCATION
SOUTHWEST HIGH SCHOOL 1250 WEST BROADWAY, N2-191							DONOR-RECOMMENDED,
MINNEAPOLIS, MN 55411	41-0851980	GOVERNMENT	10,000.	0.			EDUCATION
LEAGUE OF WOMEN VOTERS OF MINNEAPOLIS - PO BOX 7570 - MINNEAPOLIS, MN 55407	41-0417590	NON 501(C)(3) EX	6,155.	0.			CIVIL RIGHTS, SOCIAL ACTION & ADVOCACY

2

Schedule I (Form 990) 2021 THE MINNEAPOLIS FOUNDA	ATION				41-6029402 Pag
Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed.	. Complete if the	e organization answe	ered "Yes" on Form 9	990, Part IV, line 22.	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS AND AWARDS	340	735,188.	0.	N/A	N/A
EAP HARDSHIP ASSISTANCE	1521	3,522,847.	0.	N/A	N/A
Part IV Supplemental Information. Provide the information red	 quired in Part I, lin	le 2; Part III, column	(b); and any other a	dditional information.	
PART I, LINE 2:					
THE FOUNDATION REQUIRES RECIPIENTS OF COMPETITIVE	COMMUNITY GRA	ANTS TO			
SUBMIT FINAL REPORTS ONE YEAR FROM THE GRANT APPRO	VAL DATE. GRA	ANTEES WITH			
MORE THAN ONE YEAR OF SUPPORT ARE REQUIRED TO SUBM	IT ANNUAL INT	PERIM			
REPORTS. ADDITIONAL REPORTING MAYBE REQUIRED AND D	ESCRIBED IN G	FRANT			
AGREEMENT FORMS. FROM TIME TO TIME, THE FOUNDATION	COMMISSIONS	INDEPENDENT			
EVALUATIONS OF GRANT PROGRAMS.					

BEFORE GRANTS ARE ISSUED BY DONOR-ADVISED FUNDS OF THE FOUNDATION, THE

132291

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

➤ Attach to Form 990.

➤ Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

THE MINNEAPOLIS FOUNDATION

Employer identification number 41-6029402

Pa	art I Questions Regarding Compensation								
			Yes	No					
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,								
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.								
	First-class or charter travel Housing allowance or residence for personal use								
	Travel for companions Payments for business use of personal residence								
	Tax indemnification and gross-up payments X Health or social club dues or initiation fees								
	Discretionary spending account Personal services (such as maid, chauffeur, chef)								
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or								
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Х	<u> </u>					
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,								
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	Х	<u> </u>					
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's								
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to								
	establish compensation of the CEO/Executive Director, but explain in Part III.								
	X Compensation committee Written employment contract								
	Independent compensation consultant								
	Form 990 of other organizations X Approval by the board or compensation committee								
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing								
	organization or a related organization:								
а	Receive a severance payment or change-of-control payment?	4a		X					
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X					
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х					
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.								
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.								
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation								
	contingent on the revenues of:	_		v					
	The organization?	5a		X					
D	Any related organization?	5b							
^	If "Yes" on line 5a or 5b, describe in Part III.								
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation								
	contingent on the net earnings of:			х					
	The organization?	6a		X					
b	Any related organization?	6b		_					
-	If "Yes" on line 6a or 6b, describe in Part III.								
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	7		х					
	not described on lines 5 and 6? If "Yes," describe in Part III	7							
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			х					
•	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8							
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in								
	Regulations section 53.4958-6(c)?	9	1	1					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990	
(1) R.T. RYBAK	(i)	408,757.	0.	0.	23,200.	39,117.	471,074.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) JEAN ADAMS	(i)	286,254.	0.	0.	23,200.	35,679.	345,133.	0.	
SENIOR VICE PRESIDENT, STRATEGY & CO		0.	0.	0.	0.	0.	0.	0.	
(3) CHANDA BAKER	(i)	257,053.	0.	0.	21,497.	36,248.	314,798.	0.	
CHIEF IMPACT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(4) CHRISTOPHER BEACH	(i)	251,542.	0.	0.	21,892.	40,612.	314,046.	0.	
SENIOR VICE PRESIDENT, PHILANTHROPIC	(ii)	0.	0.	0.	0.	0.	0.	0.	
(5) WILLIAM STERNBERG	(i)	186,172.	0.	0.	15,712.	42,664.	244,548.	0.	
DIRECTOR, BUSINESS DEVELOPMENT & PHI	(ii)	0.	0.	0.	0.	0.	0.	0.	
(6) GREG WENZ	(i)	187,283.	0.	0.	14,950.	1,732.	203,965.	0.	
CFO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(7) MILPHA BLAMO	(i)	148,927.	0.	0.	12,641.	33,528.	195,096.	0.	
VICE PRESIDENT, TALENT & CULTURE	(ii)	0.	0.	0.	0.	0.	0.	0.	
(8) JENNY JOHNSON	(i)	137,721.	0.	0.	12,260.	37,704.	187,685.	0.	
PHILANTHROPIC ADVISOR	(ii)	0.	0.	0.	0.	0.	0.	0.	
(9) SUZANNE KOEPPLINGER	(i)	151,422.	0.	0.	12,326.	18,050.	181,798.	0.	
DIRECTOR, CATALYST INITIATIVE	(ii)	0.	0.	0.	0.	0.	0.	0.	
(10) PATRICE RELERFORD	(i)	151,675.	0.	0.	12,327.	10,833.	174,835.	0.	
SENIOR DIRECTOR, IMPACT & COLLECTIVE	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)							_	
	(ii)							_	
	(i)							_	
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 1A:
HEALTH/SOCIAL CLUB OR INITIATION FEES WERE PAID ON BEHALF OF R.T. RYBAK,
CHANDA SMITH BAKER, AND CHRISTOPHER BEACH IN THE AMOUNTS OF \$4,893, \$5,990,
AND \$3,869 RESPECTIVELY.
THESE AMOUNTS WERE NOT INCLUDED IN THEIR 2021 TAXABLE COMPENSATION AS THEY
WERE FOR BUSINESS PURPOSES ONLY AND THEREFORE CONSTITUTE A NON-TAXABLE
WORKING CONDITION FRINGE.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

➤ Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization Employer identification number THE MINNEAPOLIS FOUNDATION 41-6029402

Par	τι	Types	of Property							
				(a)	(b)	(c)	(d)			
				Check if	Number of contributions or	Noncash contribution amounts reported on	Method of de		_	_
				applicable		Form 990, Part VIII, line 1g	noncash contribu	tion an	nounts	3
1	Art -	Works of a	art							
2			treasures							
3			interests							
4			olications							
5			ousehold goods							
6		-	vehicles							
7			nes							
8		lectual pro								
9			blicly traded	Х	442	28,138,394.	STOCK MARKET QUOT	res		
10			sely held stock	X	10	14,368,204.	FAIR MARKET VALUE	3		
11			rtnership, LLC, or							
	trust	tinterests								
12	Sec	urities - Mis	scellaneous	Х	1	371,500.	FAIR MARKET VALUE	3		
13	Qua	lified conse	ervation contribution -							
		oric structu								
14	Qua	lified conse	ervation contribution - Other							
15		estate - R								
16			ommercial							
17			ther							
18										
19			'							
20			dical supplies							
21										
22			icts							
23			imens							
24			artifacts							
25		•)							
26 07)							
27		er ▶ (er ▶ ()							
<u>28</u> 29			ms 8283 received by the organiz	ration during	the tay year for e	ontributions				
23			organization completed Form 828	_	•				1	
	101 1	villori tilo o	rganization completed from eze	50, i ait v, b	once / tolknowledge	ement 29			Yes	No
30a	Duri	ng the vea	r, did the organization receive by	/ contributio	n any property rep	orted in Part I. lines 1 throug	nh 28, that it			110
			at least three years from the date							
			ses for the entire holding period?					30a		Х
b			be the arrangement in Part II.							
31										
			nization hire or use third parties							
		ributions?	·		_	•		32a	х	
b	If "Y	es," descri	be in Part II.				·			
33	If the	e organizat	ion didn't report an amount in c	olumn (c) for	a type of property	for which column (a) is che	cked,			
	desc	cribe in Par	t II.							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2021

Part II	Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
SCHEDULE	M, PART I, COLUMN (B):
THE FOUND	ATION REPORTS THE NUMBER OF CONTRIBUTORS ON PART I, COLUMN B.
SCHEDULE	M, LINE 32B:
THE FOUND	ATION AT TIMES WORKS WITH VENDORS TO REVIEW AND SELL ITEMS
WHEN IT M	AKES SENSE TO LEVERAGE OUTSIDE EXPERTISE.
-	
-	
-	

132142 11-17-21

SCHEDULE O (Form 990)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-FZ

► Attach to Form 990 or Form 990-EZ.

www.irs.gov/Form990 for the latest information.

2021
Open to Public

OMB No. 1545-0047

Go to www.irs.gov/Form990 for the latest information. Inspection Internal Revenue Service Name of the organization **Employer identification number** THE MINNEAPOLIS FOUNDATION 41-6029402 FORM 990, PART III, LINE 4A THE MINNEAPOLIS FOUNDATION IS ONE OF THE OLDEST AND LARGEST COMMUNITY FOUNDATIONS IN THE NATION. ESTABLISHED IN 1915. THE FOUNDATION CULTIVATES GENEROSITY BY TAKING ACTION ON THE GREATEST CIVIC, SOCIAL AND ECONOMIC NEEDSPARTNERING WITH NONPROFITS, FACILITATING GRANTMAKING DRIVING RESEARCH AND ADVOCACY, AND PROVIDING SERVICES TO DONORS SEEKING TO MAKE A DIFFERENCE IN THEIR COMMUNITIES, AS A COMMUNITY FOUNDATION, WE INVEST AND DISTRIBUTE GRANTS FROM CHARITABLE FUNDS ESTABLISHED BY MEMBERS OF THE COMMUNITY. TODAY, WE MANAGE MORE THAN \$1 BILLION IN ASSETS AND ADMINISTER MORE THAN 1 500 CHARITABLE FUNDS CREATED BY INDIVIDUALS, FAMILIES, BUSINESSES, NONPROFITS. MILLIONS OF DOLLARS IN GRANTS ARE DISTRIBUTED FROM THESE FUNDS EACH YEAR (SEE PART 1, LINE 13), EITHER PERSONALLY RECOMMENDED BY OR IN ACCORDANCE WITH THE LEGACY WISHES OF OUR DONORS. WE ALSO STEWARD A PERMANENT CHARITABLE ENDOWMENT AND DISTRIBUTE THE INCOME FROM IT TO BENEFIT THE COMMUNITY. THE FOUNDATION CREATES INTERSECTIONS IN CIVIC LIFE THAT FOSTER A GENEROUS COMMUNITY OF DONORS, ORGANIZATIONS, STAFF, VOLUNTEERS, RESIDENTS WHO LISTEN, LEARN, AND TAKE RESPONSIVE ACTION TO ADDRESS PRESSING NEEDS. WE SUPPORT DONORS AND PARTNERS AS THEY EXPRESS THEIR GENEROSITYPERSONALLY, COLLECTIVELY, AND ACROSS GENERATIONS. WE INVEST IN COMMUNITY-SHAPED AND COMMUNITY-DRIVEN SOLUTIONSUSING ALL AVAILABLE

ELEVATE THE VOICES AND LEADERSHIP OF OTHERS. WE CREATE MEASURABLE

TOOLS AND RESOURCES. WE USE OUR ACCESS AND INFLUENCE TO AMPLIFY AND

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) 2021

<u>Schedule O (Form 990) 2021</u> Page **2**

Employer identification number Name of the organization THE MINNEAPOLIS FOUNDATION 41-6029402 MEANING AND IMPACT ACROSS OUR WORK THROUGH RESEARCH, EVALUATION, AND KNOWLEDGE-SHARING. WE DEMONSTRATE PHILANTHROPIC AND ORGANIZATIONAL EXCELLENCE IN IMPACT, INTEGRITY, AND INNOVATION. DURING THE YEAR ENDED MARCH 31, 2022, THE MINNEAPOLIS FOUNDATION RECEIVED MORE THAN \$130 MILLION IN GIFTS AND AWARDED MORE THAN \$100 MILLION IN TOTAL GRANTS. OUR DONORS RECOMMENDED MORE THAN \$73 MILLION IN GRANTS TO CAUSES LOCALLY AND AROUND THE UNITED STATES. THE FOUNDATION DISTRIBUTED COMMUNITY GRANTS TOTALING OVER \$7.7 MILLION. MORE INFORMATION ABOUT THE MINNEAPOLIS FOUNDATION CAN BE FOUND AT WWW.MPLSFOUNDATION.ORG. FORM 990, PART VI, SECTION A, LINE 1A: THE EXECUTIVE COMMITTEE IS COMPRISED OF TEN MEMBERS, APPOINTED FROM AMONG THE BOARD TRUSTEES. THE EXECUTIVE COMMITTEE HAS THE AUTHORITY TO ACT ON BEHALF OF THE BOARD OF TRUSTEES BETWEEN MEETINGS. EXCEPT FOR SIGNIFICANT ACTIONS INCLUDING AMENDING THE BYLAWS, APPOINTING MEMBERS, MERGERS, SALES OF SIGNIFICANT ASSETS, DISSOLUTIONS, ETC. THE AUDIT COMMITTEE IS COMPRISED OF FOUR BOARD TRUSTEES AND HAS THE AUTHORITY TO APPROVE THE FINANCIAL STATEMENTS PRIOR TO BOARD MEETING. FORM 990, PART VI, SECTION B, LINE 11B: PRIOR TO ITS BEING FILED, THE FORM 990 WAS REVIEWED BY MANAGEMENT, REVIEWED AND APPROVED BY THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES, AND PROVIDED ELECTRONICALLY TO THE BOARD OF TRUSTEES.

FORM 990, PART VI, SECTION B, LINE 12C:

Schedule O (Form 990) 2021 Page 2

Schedule O (Form 990) 2021	Page 2
Name of the organization THE MINNEAPOLIS FOUNDATION	Employer identification number 41-6029402
RESPONSIBLE PERSONS INCLUDE THE BOARD OF TRUSTEES, MEMBERS OF A COMMITTEE	
WITH THE AUTHORITY OF THE BOARD, AND OFFICERS. EACH NEW RESPONSIBLE PERSON	
IS REQUIRED TO REVIEW A COPY OF THE CONFLICT OF INTEREST POLICY AND TO	
ACKNOWLEDGE IN WRITING THAT HE OR SHE HAS DONE SO. TO IDENTIFY POTENTIAL	
CONFLICTS, EACH RESPONSIBLE PERSON ANNUALLY FILES A CONFLICT OF INTEREST	
DISCLOSURE STATEMENT WITH THE FOUNDATION'S PRESIDENT/CEO INDICATING ANY	
ANTICIPATED OR POTENTIAL CONFLICT SITUATIONS. ANY SUCH INFORMATION IS	
GENERALLY MADE AVAILABLE ONLY TO THE PRESIDENT/CEO OR APPROPRIATE COMMITTEE	
CHAIR, EXCEPT TO THE EXTENT ADDITIONAL DISCLOSURE IS NECESSARY IN	
CONNECTION WITH THE IMPLEMENTATION OF A POLICY. A RESPONSIBLE PERSON WITH A	
CONFLICT DOES NOT PARTICIPATE IN DISCUSSIONS OF THE MATTER EXCEPT TO ANSWER	
MATERIAL FACTS AND ANSWER QUESTIONS. THE RESPONSIBLE PERSON WITH A CONFLICT	
OF INTEREST LEAVES THE ROOM FOR A PORTION OF THE DISCUSSION. FINALLY, THE	
RESPONSIBLE PERSON WITH A CONFLICT OF INTEREST IS NOT ALLOWED TO VOTE ON	
THE MATTER AND MAY BE REQUIRED TO LEAVE THE ROOM FOR THE VOTE. AFTER	
COLLECTING ALL RELEVANT INFORMATION, THE BOARD MAY APPROVE A TRANSACTION BY	
MAJORITY VOTE.	
FORM 990, PART VI, SECTION B, LINE 15:	
IN JULY OF 2016, THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES	
ESTABLISHED A COMPENSATION COMMITTEE WHOSE PURPOSE IS TO ENSURE THE	
FOUNDATION'S BOARD OF TRUSTEES DETERMINES THE ADEQUACY AND REASONABLENESS	
OF THE TOTAL COMPENSATION PAID TO THE CHIEF EXECUTIVE OFFICER AND	
COMPENSATION RANGES FOR OTHER SENIOR LEADERSHIP TEAM MEMBERS (SLT). THE	
COMMITTEE ARE TO:	
1. (A) CONDUCT AN ANNUAL REVIEW OF THE REASONABLENESS OF THE CEO'S	

Schedule O (Form 990) 2021

PERFORMANCE AND TOTAL COMPENSATION IN RELATION TO THE MARKETPLACE; (B)

<u>Schedule O (Form 990) 2021</u>

Name of the organization **Employer identification number** THE MINNEAPOLIS FOUNDATION 41-6029402 SOLICIT BOARD INPUT REGARDING THE CEO'S PERFORMANCE AGAINST ANNUAL PERFORMANCE GOALS; (C) DECIDE ON ANY CHANGES IN THE CEO'S TOTAL COMPENSATION; (D) DECIDE ON ANY CHANGES IN THE CEO'S EMPLOYMENT AGREEMENT, SEVERANCE AND/OR RETENTION AGREEMENT, IF ANY ARE IN EFFECT; 2. WITH RESPECT TO SENIOR LEADERSHIP (INCLUDING THE CEO). A COMPENSATION MARKET ANALYSIS BY AN OUTSIDE NEUTRAL THIRD PARTY CONSULTANT WILL BE CONDUCTED EVERY TWO YEARS TO GATHER AND REVIEW IN ADVANCE APPROPRIATE MARKET COMPARABILITY DATA ON THE AMOUNT AND FORM OF COMPENSATION PAID FOR COMPARABLE EXECUTIVE POSITIONS BY OTHER COMPARABLE EMPLOYERS, INCLUDING THOSE ORGANIZATIONS WITH WHICH THE FOUNDATION MAY BE COMPETING FOR EXECUTIVE TALENT. AND TO ASSURE THAT THE COMPARABILITY DATA SO GATHERED AND REVIEWED MEETS THE STANDARD FOR "APPROPRIATE DATA AS TO COMPARABILITY" TO QUALIFY FOR THE REBUTTABLE PRESUMPTION OF REASONABLENESS UNDER INTERNAL REVENUE CODE SECTION 4958; 3. THE CEO WILL OBTAIN THE PRIOR APPROVAL OF THE COMMITTEE TO PROVIDE COMPENSATION TO A SLT MEMBER THAT IS OUTSIDE OF A PAY TOLERANCE OF +/- 20% OF MARKET. THE COMMITTEE MUST REVIEW AND APPROVE THE SEVERANCE AND/OR RETENTION AGREEMENTS FOR ANY SLT MEMBER IF OUTSIDE THE RANGE PREVIOUSLY APPROVED BY THE COMMITTEE; 4. BEFORE THE EXECUTIVE COMMITTEE'S NEXT MEETING OR (II) SIXTY (60) DAYS AFTER MAKING ITS DETERMINATION OF REASONABLENESS WITH RESPECT TO THE TOTAL COMPENSATION OF ALL SLT MEMBER EXECUTIVES (INCLUDING THE CEO) DOCUMENT IN A WRITTEN REPORT: (A) THE TERMS THAT WERE APPROVED AND THE DATE APPROVED; (B) THE MEMBERS OF THE COMMITTEE PRESENT DURING THE DISCUSSION AND THOSE WHO VOTED IN FAVOR AND THOSE WHO DISSENTED OR ABSTAINED; (C) THE COMPARABILITY

Schedule O (Form 990) 2021 Page 2 Name of the organization **Employer identification number** THE MINNEAPOLIS FOUNDATION 41-6029402 DATA OBTAINED AND RELIED UPON BY THE COMMITTEE AND HOW THE DATA WERE OBTAINED; AND (D) ANY ACTIONS TAKEN WITH RESPECT TO THE DETERMINATION BY ANYONE WHO IS OTHERWISE A MEMBER OF THE COMMITTEE BUT WHO HAD A CONFLICT OF INTEREST. THE REPORT MUST BE APPROVED BY THE COMMITTEE AS REASONABLY ACCURATE AND COMPLETE WITHIN A REASONABLE TIME THEREAFTER AND REPORTED TO THE BOARD; THIS PROCESS WAS LAST COMPLETED IN 2018. FORM 990, PART VI, SECTION C, LINE 19: THE FOUNDATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST. FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: CHANGE IN VALUE OF TRUSTS 1,637,004. CHANGE IN CSV OF LIFE INSURANCE 6,218. NET CHANGE IN AGENCY FUNDS -3,753,071. TOTAL TO FORM 990, PART XI, LINE 9 -2,109,849.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Department of the Treasury Internal Revenue Service

Name of the organization

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

	THE MINNEAPOLIS FOUN	NDATION						41-6029402		
Part I	Identification of Disregarded Entities. Comple	ete if the organization answered "Yes	s" on Form 990, Part IV, line 3	3.						
	(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state of foreign country)	or Tota	(d) al income	(e) End-of-yea		ts Direct control entity		l
Part II	Identification of Related Tax-Exempt Organiz organizations during the tax year.	ations. Complete if the organization	n answered "Yes" on Form 99	0, Part IV, lin	e 34, becau	use it had one	or more	related tax-exer	mpt	
	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt ((e) ublic charity tus (if section	Dire	(f) ct controlling entity	Section 5 contr	olled
						501(c)(3))			Yes	No
41-6015	O C. HAMER TRUST U/W 34046950 - 5221, PO BOX 64713, TRUST TAX SERVICE JL, MN 55164	SUPPORT THE MINNEAPOLIS FOUNDATION	MINNESOTA	501(C)(3) PF		THE MI	NNEAPOLIS	x	
	. ROGERS TRUST U/W 35078340 -									
41-6016	5003, PO BOX 64713, TRUST TAX SERVICE	SUPPORT THE MINNEAPOLIS					THE MI	NNEAPOLIS		
ST. PAU	JL, MN 55164	FOUNDATION	MINNESOTA	501(C)(3) PF		FOUNDA	TION	х	
	P. THOMAS TRUST U/A 35062130 - 5509 PO BOX 64713 TRUST TAX SERVICE	SUPPORT THE MINNEAPOLIS					THE MI	NNEAPOLIS		

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

41-6015040, PO BOX 64713, TRUST TAX SERVICE, SUPPORT THE MINNEAPOLIS

SEE PART VII FOR CONTINUATIONS

FOUNDATION

FOUNDATION

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FOUNDATION

FOUNDATION

THE MINNEAPOLIS

ST. PAUL, MN 55164

ST. PAUL, MN 55164

GEORGE H. WARREN TRUST 3 U/A 35028390 -

MINNESOTA

MINNESOTA

501(C)(3)

501(C)(3)

PF

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Part II Continuation of Identification of Related Tax-Exempt Organizations

Schedule R (Form 990)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	Section 5 contr organiz	rolled zation?
THEOMED GUADINADI E MOUGH BIND 25061070				501(c)(3))		Yes	No
WEESNER CHARITABLE TRUST FUND 35061070 -	SUPPORT THE MINNEAPOLIS				THE MINNEAPOLIS		
, , ,	FOUNDATION	MINNESOTA	501(C)(3)	PF	FOUNDATION	v	
ST. PAUL, MN 55164 JOHN JUNELL TRUST U/W 35072540 - 41-6015852	FOUNDATION	MINNESOIA	501(C)(3)	FF	FOUNDATION	Х	
PO BOX 64713 TRUST TAX SERVICE	SUPPORT THE MINNEAPOLIS				THE MINNEAPOLIS		
ST. PAUL, MN 55164	FOUNDATION	MINNESOTA	501(C)(3)	PF	FOUNDATION	х	
BENJ W. STEPHENSON TRUST U/W 35029310 -	FOUNDATION	MINNESOIA	501(C)(3)	FF	FOUNDATION	^	
41-6015045, PO BOX 64713, TRUST TAX SERVICE,	CIIDDODE EUE MINNEADOLIG				THE MINNEAPOLIS		
ST. PAUL MN 55164	FOUNDATION	MINNESOTA	501(C)(3)	PF	FOUNDATION	х	
B .W. STEPHENSON TRUST U/W MINNEAPOLIS	FOUNDATION	MINNESOIA	501(C)(3)	FF	FOUNDATION	^	
FOUNDATION 35029311 - 41-6015046 PO BOX	SUPPORT THE MINNEAPOLIS				THE MINNEAPOLIS		
,	FOUNDATION	MINNESOTA	501(C)(3)	PF	FOUNDATION	х	
64713, TRUST TAX SERVICE, ST. PAUL, MN	FOUNDATION	MINNESOTA	501(C)(3)	Pr	FOUNDATION	Λ.	
HARRINGTON TRUST U/W PAR 15 ITEM 10 35036119	GUDDODE EUR MINNEADOLIG				THE MINNEY DOLLE		
- 41-6151781, PO BOX 64713, TRUST TAX	SUPPORT THE MINNEAPOLIS FOUNDATION	MINNESOTA	501(C)(3)	PF	THE MINNEAPOLIS FOUNDATION	x	
SERVICE, ST. PAUL, MN 55164	FOUNDATION	MINNESUTA	501(C)(3)	PF	FOUNDATION	X	
CHAS M. HARRINGTON TRUST U/W PAR 17 35036520	GUDDODE EUR MINDENDOLIG				EUR MINNEADOLIG		
- 41-6015088, PO BOX 64713, TRUST TAX	SUPPORT THE MINNEAPOLIS	VIII GOTI	E01/G1/21		THE MINNEAPOLIS		
SERVICE, ST. PAUL, MN 55164	FOUNDATION	MINNESOTA	501(C)(3)	PF	FOUNDATION	X	
ELIZABETH H. MITCHELL TUA 06980500 -					THE MINITIPE TO		
41-6013070, 625 MARQUETTE AVE, MAC	SUPPORT THE MINNEAPOLIS		504 (5) (0)		THE MINNEAPOLIS		
N9311-142, MINNEAPOLIS, MN 55402	FOUNDATION	MINNESOTA	501(C)(3)	PF	FOUNDATION	Х	
F. C. VAN DUSEN FOR MINNEAPOLIS FOUNDATION	<u> </u>						
07116100 - 41-6011973, 625 MARQUETTE AVE,	SUPPORT THE MINNEAPOLIS				THE MINNEAPOLIS		
MAC N9311-142, MINNEAPOLIS, MN 55402	FOUNDATION	MINNESOTA	501(C)(3)	PF	FOUNDATION	Х	
C. M. HARRINGTON FOR MINNEAPOLIS FOUNDATION	-						
06600900 - 41-6176659, 625 MARQUETTE AVE,	SUPPORT THE MINNEAPOLIS				THE MINNEAPOLIS		
MAC N9311-142, MINNEAPOLIS, MN 55402	FOUNDATION	MINNESOTA	501(C)(3)	PF	FOUNDATION	Х	
	_						
	_						
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Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

	organisations treated as a parameter grant											
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	Disproportionate allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General of managing partner?	Percentage ownership	
		country)		sections 512-514)		833013	Yes	No	K-1 (Form 1065)	Yes N	<u></u> اد	
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Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	()	i)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership	ent	tion b)(13) rolled tity?
		country)		•				Yes	No
			MINNEAPOLIS						
CHARITABLE REMAINDER TRUSTS (34)	TRUST INVESTMENTS	MN	FOUNDATION	TRUST				Х	<u> </u>
			MINNEAPOLIS						
CHARITABLE LEAD TRUSTS (9)	TRUST INVESTMENTS	MN	FOUNDATION	TRUST				Х	<u> </u>

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Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		X			
					1b		Х			
					1c	Х				
					1d	Х				
					1e		Х			
f	Dividends from related organization(s)				1f		X			
					1g		Х			
h	Purchase of assets from related organization(s)				1h		Х			
i	Exchange of assets with related organization(s)				1i		Х			
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		X			
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		X			
					11		X			
m Performance of services or membership or fundraising solicitations by related organization(s)										
					1n		Х			
d Loans or loan guarantees to or for related organization(s) e Loans or loan guarantees by related organization(s) f Dividends from related organization(s) g Sale of assets to related organization(s) h Purchase of assets from related organization(s) i Exchange of assets with related organization(s) j Lease of facilities, equipment, or other assets to related organization(s) k Lease of facilities, equipment, or other assets from related organization(s) l Performance of services or membership or fundraising solicitations for related organization(s)										
p Reimbursement paid to related organization(s) for expenses										
q	Reimbursement paid by related organization(s) for expenses				1p 1q		X			
•					•					
r	Other transfer of cash or property to related organization(s)				1r		Х			
					1s		X			
	(a) Name of related organization	Transaction		(d) Method of determining amount inv	olved					
(1)										
(2)										
(3)										
(4)										
(5)										
				1						

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Yes No

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Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec. 501(c)(3) orgs.? Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproptionate allocation	Code V-UBI amount in box 2 of Schedule K-	General of managing partner? Yes No	(k) Percentage ownership
	-									

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CARRYOVER DATA TO 2022

Name THE MINNEAPOLIS FOUNDATION	Employer Identification Numbe	r
Based on the information provided with this return, the following are possible carryover amounts to nex	t year.	
FEDERAL POST-2017 NET OPERATING LOSS - QUALIFIED INVESTMENT		2,094,195
FEDERAL CONTRIBUTION - 50% CASH		376,386
CA NET OPERATING LOSS		87,329
CA CONTRIBUTION - 50% CASH		606,480

	e and Entity: QUA	LIFIED INVEST	MENT I POST-20 Section 382 Carryover	17 NO	DETAIL C	ARRYOVER SCH	EDULE				
Year Origi	r Original i- Carryover	Total Amount Used	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
A 201 B 201 C 202 D 202	9 194,840. 0 482,098.										
E F G H											
J K L											
M N O P											
Q R S T											
V W	E Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount
Deta Type		Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for
B C D E F											
G H J											
K L M											
O P Q R											
S T U											
W											

	and Entity: CON	TRIBUTION - 5	0% CASH FED Section 382 Carryover								
Year Origi	Original - Carryover - Amount	Total Amount Used	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
A 201 B 201 C 202 D 202	9 76,746. 0 100,001.										
E F G H											
J K L											
M N O P Q											
R S T U											
V W	E Amount I S Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
Туре											
B C D E F											
G H I J											
K L M N											
O P Q R S											
T U V W											

	Type and Entity: NOL CA DETAIL CARRYOVER SCHEDULE Section 382 Annual Limitation Section 382 Carryover											
Y	ear rigi-	Original Carryover Amount	Total Amount Used	Amount Used for 03/31/20	Amount Used for							
	017	2,059.	1,355.	1,355.								
B 2	018	4,543. 82 006										
A 2 B 2 C 2 D 2 E F G	021	2,059. 4,543. 82,006. 76.										
F												
G												
H												
J												
K L												
M												
N O												
O P Q R S T												
R												
S												
ΰ												
U V W												
VV		E Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount
De To	etail ype	S Used for B C	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for
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Q												
Q R S T												
5 T												
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V W												

	and Entity: CON	TRIBUTION - 5	0% CASH CA Section 382 Carryover								
Year Origi- nated	Original Carryover	Total Amount Used	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
A 201 B 201 C 201 D 201	94,765. 7 107,579. 8 202,344.										
E 2020 F 2020 G	0 100,001. 1 100,326.										
J K											
M N O											
P Q R S T											
T U V W											
Detai Type		Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
A B C D											
D E F G H											
J K L											
M N O P											
Q R S T											
V W											