

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

Department of the Treasury
Internal Revenue Service

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

2021

Open to Public Inspection

For calendar year 2021 or tax year beginning 12/01 **, 2021, and ending** 11/30 **, 20** 22

Name of foundation ANDERSEN CORPORATE FOUNDATION		A Employer identification number 41-6020912
Number and street (or P.O. box number if mail is not delivered to street address) 342 FIFTH AVENUE NORTH	Room/suite 200	B Telephone number (see instructions) (651) 439-1557
City or town, state or province, country, and ZIP or foreign postal code BAYPORT, MN 55003		C If exemption application is pending, check here ▶ <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here . . . ▶ <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation . . . ▶ <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here . . . ▶ <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 49,733,063	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d), must be on cash basis.)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here . . . ▶ <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	1,000,000			
	2 Check ▶ <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	615	615		
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	1,254,971			
	b Gross sales price for all assets on line 6a 6,018,875				
	7 Capital gain net income (from Part IV, line 2)		1,254,971		
	8 Net short-term capital gain			0	
	9 Income modifications				
	10a Gross sales less returns and allowances	0			
b Less: Cost of goods sold	0				
c Gross profit or (loss) (attach schedule)	0				
11 Other income (attach schedule)	950,374	952,393	0		
12 Total. Add lines 1 through 11	3,205,960	2,207,979	0		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)	0	0	0	0
	b Accounting fees (attach schedule)	132,209	66,105	0	66,104
	c Other professional fees (attach schedule)	205,770	180,045	0	25,725
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	123,574	52,774	0	0
	19 Depreciation (attach schedule) and depletion	0	0	0	
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	2,747	0	0	2,747
	24 Total operating and administrative expenses. Add lines 13 through 23	464,300	298,924	0	94,576
	25 Contributions, gifts, grants paid	2,505,000			2,505,000
26 Total expenses and disbursements. Add lines 24 and 25	2,969,300	298,924	0	2,599,576	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	236,660				
b Net investment income (if negative, enter -0-)		1,909,055			
c Adjusted net income (if negative, enter -0-)			0		

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions. ANDERSEN CORPORATE FOUNDATION	Taxpayer identification number (TIN) 41-6020912
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 342 FIFTH AVENUE NORTH, 200	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. BAYPORT, MN 55003	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 4

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12
Form 990-T (corporation)	07		

CHRIS GALVIN

- The books are in the care of ▶ 100 FOURTH AVENUE NORTH - BAYPORT, MN 55003

Telephone No. ▶ 651-264-5242 Fax No. ▶ _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until OCTOBER 16, 2023, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year _____ or
 ▶ tax year beginning DEC 1, 2021, and ending NOV 30, 2022.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	26,538.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	86,687.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	43,315	46,850	46,850
	2 Savings and temporary cash investments	16,223	16,356	16,356
	3 Accounts receivable ▶ Less: allowance for doubtful accounts ▶		0	0
	4 Pledges receivable ▶ Less: allowance for doubtful accounts ▶		0	0
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)	0	0	0
	7 Other notes and loans receivable (attach schedule) ▶ Less: allowance for doubtful accounts ▶	0 0	0 0	0 0
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U.S. and state government obligations (attach schedule)	0	0	0
	b Investments—corporate stock (attach schedule)	0	0	0
	c Investments—corporate bonds (attach schedule)	0	0	0
	11 Investments—land, buildings, and equipment: basis ▶ Less: accumulated depreciation (attach schedule) ▶	0 0	0 0	0 0
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	55,137,235	49,669,857	49,669,857
	14 Land, buildings, and equipment: basis ▶ Less: accumulated depreciation (attach schedule) ▶	0 0	0 0	0 0
15 Other assets (describe ▶ _____)	0	0	0	
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	55,196,773	49,733,063	49,733,063	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons	0	0	
	21 Mortgages and other notes payable (attach schedule)	0	0	
	22 Other liabilities (describe ▶ _____)	0	0	
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 24, 25, 29, and 30.			
	24 Net assets without donor restrictions	55,196,773	49,733,063	
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
29 Total net assets or fund balances (see instructions)	55,196,773	49,733,063		
30 Total liabilities and net assets/fund balances (see instructions)	55,196,773	49,733,063		

Part III Analysis of Changes in Net Assets or Fund Balances			
1 Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)		1	55,196,773
2 Enter amount from Part I, line 27a		2	236,660
3 Other increases not included in line 2 (itemize) ▶		3	0
4 Add lines 1, 2, and 3		4	55,433,433
5 Decreases not included in line 2 (itemize) ▶		5	5,700,370
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29		6	49,733,063

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	RIIFL MULTI ASSET CORE PLUS	PURCHASE		
b	PRIVATE MARKETS FUND 2021 LLC	PURCHASE		
c	RIIFL CORE BOND FUND	PURCHASE		
d	RIIFL UNCONSTRAINED BOND FUND	PURCHASE		
e	(SEE STATEMENT)			

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
a	2,950,223		2,955,491	(5,268)
b	15,078		15,078	0
c	937,457		1,033,513	(96,056)
d	592,041		622,410	(30,369)
e				

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.				
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			0	(5,268)
b			0	0
c			0	(96,056)
d			0	(30,369)
e				

2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	1,254,971
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8	3	0

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

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)	1	26,536
b	All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	2	
3	Add lines 1 and 2	3	26,536
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	26,536
6	Credits/Payments:		
a	2021 estimated tax payments and 2020 overpayment credited to 2021	6a	86,687
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d	7	86,687
8	Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	0
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	60,151
11	Enter the amount of line 10 to be: Credited to 2022 estimated tax 60,151 Refunded	11	0

Part VI-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		✓
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		✓
c Did the foundation file Form 1120-POL for this year?		✓
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ _____ (2) On foundation managers. ▶ \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		✓
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		✓
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		✓
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by <i>General Instruction T</i> .		✓
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	✓	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	✓	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. ▶ <u>MN</u>		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation	✓	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2021 or the tax year beginning in 2021? See the instructions for Part XIII. If "Yes," complete Part XIII		✓
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		✓
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions		✓
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions		✓
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ HTTPS://WWW.ANDERSENWINDOWS.COM/ABOUT/COMMUNITY/	✓	
14 The books are in care of ▶ <u>CHRIS GALVIN</u> Telephone no. ▶ <u>(651) 264-5242</u> Located at ▶ <u>100 FOURTH AVENUE NORTH, BAYPORT, MN</u> ZIP+4 ▶ <u>55003</u>		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year ▶ 15		
16 At any time during calendar year 2021, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?		✓
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶		

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year, did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1a(1)	✓
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	1a(2)	✓
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)	✓
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)	✓
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	1a(5)	✓
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	1a(6)	✓
b If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	✓
c Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>		
d Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2021?	1d	✓
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a At the end of tax year 2021, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2021?	2a	✓
If "Yes," list the years ► 20____, 20____, 20____, 20____		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.)	2b	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ► 20____, 20____, 20____, 20____		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	3a	✓
b If "Yes," did it have excess business holdings in 2021 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2021.)	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	✓
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2021?	4b	✓

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

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

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

1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
KAREN RICHARD 100 FOURTH AVE N, BAYPORT, MN 55003	PRESIDENT, 1.0	0	0	0
ELIZA CHLEBECK 100 FOURTH AVE N, BAYPORT, MN 55003	VP/SECRETARY, 1.0	0	0	0
CHRIS GALVIN 100 FOURTH AVE N, BAYPORT, MN 55003	TREASURER, 1.0	0	0	0
(SEE STATEMENT)				

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 ▶ 0

Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
RUSSELL INVESTMENTS 1301 2ND AVENUE, SEATTLE, WA 98101	INVESTMENT MANAGEMENT	180,045
SRI, INC. WHITE PINE BLDG, 342 5TH AVE N., STE 200, BAYPORT, MN 55003	GRANT CONSULTING AND ACCOUNTING SERVICES	113,725
Total number of others receiving over \$50,000 for professional services		0

Part VIII-A Summary of Direct Charitable Activities

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

	Expenses
1	
2	
3	
4	

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

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

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

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	94,260
c	Fair market value of all other assets (see instructions)	1c	51,894,734
d	Total (add lines 1a, b, and c)	1d	51,988,994
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	51,988,994
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)	4	779,835
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	51,209,159
6	Minimum investment return. Enter 5% (0.05) of line 5	6	2,560,458

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

1	Minimum investment return from Part IX, line 6	1	2,560,458
2a	Tax on investment income for 2021 from Part V, line 5	2a	26,536
b	Income tax for 2021. (This does not include the tax from Part V.)	2b	0
c	Add lines 2a and 2b	2c	26,536
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,533,922
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	2,533,922
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1	7	2,533,922

Part XI Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	2,599,576
b	Program-related investments—total from Part VIII-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4	4	2,599,576

Part XII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2020	(c) 2020	(d) 2021
1 Distributable amount for 2021 from Part X, line 7				2,533,922
2 Undistributed income, if any, as of the end of 2021:				
a Enter amount for 2020 only			2,212,476	
b Total for prior years: 20 <u>17</u> , 20 <u>18</u> , 20 <u>19</u>				
3 Excess distributions carryover, if any, to 2021:				
a From 2016				
b From 2017				
c From 2018				
d From 2019				
e From 2020				
f Total of lines 3a through e	0			
4 Qualifying distributions for 2021 from Part XI, line 4: ▶ \$ <u>2,599,576</u>				
a Applied to 2020, but not more than line 2a			2,212,476	
b Applied to undistributed income of prior years (Election required—see instructions)		0		
c Treated as distributions out of corpus (Election required—see instructions)	0			
d Applied to 2021 distributable amount				387,100
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2021 (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
b Prior years' undistributed income. Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable amount—see instructions		0		
e Undistributed income for 2020. Subtract line 4a from line 2a. Taxable amount—see instructions			0	
f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2022				2,146,822
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)	0			
8 Excess distributions carryover from 2016 not applied on line 5 or line 7 (see instructions)	0			
9 Excess distributions carryover to 2022. Subtract lines 7 and 8 from line 6a	0			
10 Analysis of line 9:				
a Excess from 2017				
b Excess from 2018				
c Excess from 2019				
d Excess from 2020				
e Excess from 2021				

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

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2021, enter the date of the ruling ▶

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

	Tax year				(e) Total
	(a) 2021	(b) 2020	(c) 2019	(d) 2018	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part IX for each year listed					
b 85% (0.85) of line 2a					
c Qualifying distributions from Part XI, line 4, for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test—enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test—enter ² / ₃ of minimum investment return shown in Part IX, line 6, for each year listed					
c "Support" alternative test—enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XIV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

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

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

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

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

a The name, address, and telephone number or email address of the person to whom applications should be addressed:
 ANNA BOSAK, 342 FIFTH AVENUE NORTH, SUITE 200, BAYPORT, MN 55003, 651-264-6037, ACF@ANDERSENCORP.COM

b The form in which applications should be submitted and information and materials they should include:
 GRANT GUIDELINES AND THE GRANT APPLICATION CAN BE FOUND AT: [HTTPS://WWW.ANDERSENWINDOWS.COM/ABOUT/COMMUNITY/APPLICATIONS](https://www.andersenwindows.com/about/community/applications) MUST BE SUBMITTED ONLINE.

c Any submission deadlines:
 MARCH 1-31 AND AUGUST 1-31 ANNUALLY

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

VISIT WEBSITE FOR RESTRICTIONS AND LIMITATIONS

Part XIV Supplementary Information *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year (SEE STATEMENT)				
Total			▶ 3a	2,505,000
b Approved for future payment (SEE STATEMENT)				
Total			▶ 3b	300,000

Part XVI Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

- 1** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?
- | | Yes | No |
|--------------|-----|----|
| a | | |
| 1a(1) | | ✓ |
| 1a(2) | | ✓ |
| b | | |
| 1b(1) | | ✓ |
| 1b(2) | | ✓ |
| 1b(3) | | ✓ |
| 1b(4) | | ✓ |
| 1b(5) | | ✓ |
| 1b(6) | | ✓ |
| c | | ✓ |
| 1c | | ✓ |
- a** Transfers from the reporting foundation to a noncharitable exempt organization of:
 - (1)** Cash
 - (2)** Other assets
 - b** Other transactions:
 - (1)** Sales of assets to a noncharitable exempt organization
 - (2)** Purchases of assets from a noncharitable exempt organization
 - (3)** Rental of facilities, equipment, or other assets
 - (4)** Reimbursement arrangements
 - (5)** Loans or loan guarantees
 - (6)** Performance of services or membership or fundraising solicitations
 - c** Sharing of facilities, equipment, mailing lists, other assets, or paid employees
 - d** If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule.

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

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

Chi Go 10/11/23 **TREASURER**
 Signature of officer or trustee Date Title

May the IRS discuss this return with the preparer shown below? See instructions. Yes No

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	VOULA SPYRIDIS	<i>Voula Spyridis</i>	10/4/2023		P01795600
	Firm's name	Firm's EIN		Firm's address	
	ERNST & YOUNG US LLP	34-6565596	155 N WACKER DRIVE, CHICAGO, IL 60606		(312) 879-2183

Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

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

2021

Name of the organization ANDERSEN CORPORATE FOUNDATION

Employer identification number 41-6020912

Organization type (check one):

Filers of:

Section:

- Form 990 or 990-EZ [] 501(c)() (enter number) organization
[] 4947(a)(1) nonexempt charitable trust not treated as a private foundation
[] 527 political organization
Form 990-PF [x] 501(c)(3) exempt private foundation
[] 4947(a)(1) nonexempt charitable trust treated as a private foundation
[] 501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

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

General Rule

- [x] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- [] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
[] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
[] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization ANDERSEN CORPORATE FOUNDATION	Employer identification number 41-6020912
--	---

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ANDERSEN CORPORATION ----- 100 FOURTH AVENUE NORTH ----- BAYPORT, MN 55003 -----	\$ 1,000,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization ANDERSEN CORPORATE FOUNDATION	Employer identification number 41-6020912
--	---

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

Name of organization ANDERSEN CORPORATE FOUNDATION	Employer identification number 41-6020912
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Part III *Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor.* Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ _____
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

Department of the Treasury
Internal Revenue Service

▶ **Attach to the corporation's tax return.**
▶ **Go to www.irs.gov/Form2220 for instructions and the latest information.**

2021

Name **ANDERSEN CORPORATE FOUNDATION** Employer identification number **41-6020912**

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

Part I Required Annual Payment

1	Total tax (see instructions)		1	26,536
2a	Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1			
b	Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method			
c	Credit for federal tax paid on fuels (see instructions)			
d	Total. Add lines 2a through 2c		2d	0
3	Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation does not owe the penalty		3	26,536
4	Enter the tax shown on the corporation's 2020 income tax return. See instructions. Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5		4	50,018
5	Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3		5	26,536

Part II Reasons for Filing—Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it does not owe a penalty. See instructions.

- 6** The corporation is using the adjusted seasonal installment method.
- 7** The corporation is using the annualized income installment method.
- 8** The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

Part III Figuring the Underpayment

	(a)	(b)	(c)	(d)
9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year	04/15/2022	05/15/2022	08/15/2022	11/15/2022
10 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Schedule A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column	6,634	6,634	6,634	6,634
11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions	15,887	23,200	47,600	
Complete lines 12 through 18 of one column before going to the next column.				
12 Enter amount, if any, from line 18 of the preceding column		9,253	25,819	66,785
13 Add lines 11 and 12		32,453	73,419	66,785
14 Add amounts on lines 16 and 17 of the preceding column		0	0	0
15 Subtract line 14 from line 13. If zero or less, enter -0-	15,887	32,453	73,419	66,785
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-		0	0	
17 Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18				
18 Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column	9,253	25,819	66,785	

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17—no penalty is owed.

For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 11746L

Form **2220** (2021)

Part IV Figuring the Penalty

	(a)	(b)	(c)	(d)
19 Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions	04/15/2022	05/15/2022	08/15/2022	
20 Number of days from due date of installment on line 9 to the date shown on line 19	0	0	0	0
21 Number of days on line 20 after 4/15/2021 and before 7/1/2021	0	0	0	0
22 Underpayment on line 17 × $\frac{\text{Number of days on line 21}}{365} \times 3\% (0.03)$	\$ 0	\$ 0	\$ 0	\$ 0
23 Number of days on line 20 after 6/30/2021 and before 10/1/2021	0	0	0	0
24 Underpayment on line 17 × $\frac{\text{Number of days on line 23}}{365} \times 3\% (0.03)$	\$ 0	\$ 0	\$ 0	\$ 0
25 Number of days on line 20 after 9/30/2021 and before 1/1/2022	0	0	0	0
26 Underpayment on line 17 × $\frac{\text{Number of days on line 25}}{365} \times 3\% (0.03)$	\$ 0	\$ 0	\$ 0	\$ 0
27 Number of days on line 20 after 12/31/2021 and before 4/1/2022	0	0	0	0
28 Underpayment on line 17 × $\frac{\text{Number of days on line 27}}{365} \times 3\% (0.03)$	\$ 0	\$ 0	\$ 0	\$ 0
29 Number of days on line 20 after 3/31/2022 and before 7/1/2022	0	0	0	0
30 Underpayment on line 17 × $\frac{\text{Number of days on line 29}}{365} \times *%$	\$ 0	\$ 0	\$ 0	\$ 0
31 Number of days on line 20 after 6/30/2022 and before 10/1/2022	0	0	0	0
32 Underpayment on line 17 × $\frac{\text{Number of days on line 31}}{365} \times *%$	\$ 0	\$ 0	\$ 0	\$ 0
33 Number of days on line 20 after 9/30/2022 and before 1/1/2023	0	0	0	0
34 Underpayment on line 17 × $\frac{\text{Number of days on line 33}}{365} \times *%$	\$ 0	\$ 0	\$ 0	\$ 0
35 Number of days on line 20 after 12/31/2022 and before 3/16/2023	0	0	0	0
36 Underpayment on line 17 × $\frac{\text{Number of days on line 35}}{365} \times *%$	\$ 0	\$ 0	\$ 0	\$ 0
37 Add lines 22, 24, 26, 28, 30, 32, 34, and 36	\$ 0	\$ 0	\$ 0	\$ 0
38 Penalty. Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable line for other income tax returns.				\$ 0

*Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

Schedule A Adjusted Seasonal Installment Method and Annualized Income Installment Method

See instructions.

Form 1120-S filers: For lines 1, 2, 3, and 21, "taxable income" refers to excess net passive income or the amount on which tax is imposed under section 1374(a), whichever applies.

Part I Adjusted Seasonal Installment Method

Caution: Use this method only if the base period percentage for any 6 consecutive months is at least 70%. See instructions.

		(a)	(b)	(c)	(d)
		First 3 months	First 5 months	First 8 months	First 11 months
1	Enter taxable income for the following periods.				
a	Tax year beginning in 2018	1a			
b	Tax year beginning in 2019	1b			
c	Tax year beginning in 2020	1c			
2	Enter taxable income for each period for the tax year beginning in 2021. See the instructions for the treatment of extraordinary items	2			
3	Enter taxable income for the following periods.	First 4 months	First 6 months	First 9 months	Entire year
a	Tax year beginning in 2018	3a			
b	Tax year beginning in 2019	3b			
c	Tax year beginning in 2020	3c			
4	Divide the amount in each column on line 1a by the amount in column (d) on line 3a	4			
5	Divide the amount in each column on line 1b by the amount in column (d) on line 3b	5			
6	Divide the amount in each column on line 1c by the amount in column (d) on line 3c	6			
7	Add lines 4 through 6	7			
8	Divide line 7 by 3.0	8			
9a	Divide line 2 by line 8	9a			
b	Extraordinary items (see instructions)	9b			
c	Add lines 9a and 9b	9c			
10	Figure the tax on the amount on line 9c using the instructions for Form 1120, Schedule J, line 2, or comparable line of corporation's return	10			
11a	Divide the amount in columns (a) through (c) on line 3a by the amount in column (d) on line 3a	11a			
b	Divide the amount in columns (a) through (c) on line 3b by the amount in column (d) on line 3b	11b			
c	Divide the amount in columns (a) through (c) on line 3c by the amount in column (d) on line 3c	11c			
12	Add lines 11a through 11c	12			
13	Divide line 12 by 3.0	13			
14	Multiply the amount in columns (a) through (c) of line 10 by columns (a) through (c) of line 13. In column (d), enter the amount from line 10, column (d)	14			
15	Enter any alternative minimum tax (trusts only) for each payment period. See instructions	15			
16	Enter any other taxes for each payment period. See instructions	16			
17	Add lines 14 through 16	17			
18	For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions	18			
19	Total tax after credits. Subtract line 18 from line 17. If zero or less, enter -0-	19			

Part II Annualized Income Installment Method

		(a)	(b)	(c)	(d)
		First _____ months	First _____ months	First _____ months	First _____ months
20	Annualization periods (see instructions)	20			
21	Enter taxable income for each annualization period. See instructions for the treatment of extraordinary items	21			
22	Annualization amounts (see instructions)	22			
23a	Annualized taxable income. Multiply line 21 by line 22	23a			
b	Extraordinary items (see instructions)	23b			
c	Add lines 23a and 23b	23c			
24	Figure the tax on the amount on line 23c using the instructions for Form 1120, Schedule J, line 2, or comparable line of corporation's return	24			
25	Enter any alternative minimum tax (trusts only) for each payment period (see instructions)	25			
26	Enter any other taxes for each payment period. See instructions	26			
27	Total tax. Add lines 24 through 26	27			
28	For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions	28			
29	Total tax after credits. Subtract line 28 from line 27. If zero or less, enter -0-	29			
30	Applicable percentage	30	25%	50%	75%
31	Multiply line 29 by line 30	31			

Part III Required Installments

		1st	2nd	3rd	4th
		installment	installment	installment	installment
	Note: Complete lines 32 through 38 of one column before completing the next column.				
32	If only Part I or Part II is completed, enter the amount in each column from line 19 or line 31. If both parts are completed, enter the smaller of the amounts in each column from line 19 or line 31	32			
33	Add the amounts in all preceding columns of line 38. See instructions	33			
34	Adjusted seasonal or annualized income installments. Subtract line 33 from line 32. If zero or less, enter -0-	34			
35	Enter 25% (0.25) of line 5 on page 1 of Form 2220 in each column. Note: "Large corporations," see the instructions for line 10 for the amounts to enter	35			
36	Subtract line 38 of the preceding column from line 37 of the preceding column	36			
37	Add lines 35 and 36	37			
38	Required installments. Enter the smaller of line 34 or line 37 here and on page 1 of Form 2220, line 10. See instructions	38			

Supplemental Information**Supplemental Information.** additional information (see instructions).

Return Reference - Identifier	Explanation
FORM 990 PF PART XV - LINE 11A DESCRIPTION	INCOME FROM PARTNERSHIP INVESTMENTS

Part I, Line 6a

Net gain or (loss) from sale of assets

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Accumulated Depreciation	Sales Expense	Total (net)
(1) RIIFL MULTI ASSET CORE PLUS		Purchase			2,950,223	2,955,491				(5,268)
(2) Private Markets Fund 2021 LLC		Purchase			15,078	15,078				0
(3) RIIFL CORE BOND FUND		Purchase			937,457	1,033,513				(96,056)
(4) RIIFL UNCONSTRAINED BOND FUND		Purchase			592,041	622,410				(30,369)
(5) FLOW THROUGH RIIFL MULTI ASSET CORE PLUS (SIR6)		Purchase			1,798,574	0				1,798,574
(6) FLOW THROUGH RIIFL MULTI ASSET CORE PLUS (SIR7)		Purchase			234,577	0				234,577
(7) FLOW THROUGH RIIFL UNCONSTRAINED BOND FUND		Purchase			133,447	0				133,447
(8) FLOW THROUGH RIIFL CORE BOND FUND		Purchase			(798,095)	0				(798,095)
(9) FLOW THROUGH RIIFL REAL ESTATE EQUITY FUND		Purchase			18,268	0				18,268
(10) PERMAL		Purchase			69,603	69,710				(107)
Total					5,951,173	4,696,202		0	0	1,254,971

Description	(a) Revenue and expenses	(b) Net investment income	(c) Adjusted net income
(1) INCOME FROM PARTNERSHIP INVESTMENTS	950,374	952,393	
TOTAL	950,374	952,393	0

Description	(a) Revenue and expenses	(b) Net investment income	(c) Adjusted net income	(d) Charitable disbursements
(1) AUDIT & TAX SERVICES - ERNST & YOUNG LLP	44,209	22,105		22,104
(2) ACCOUNTING SERVICES - SRI	88,000	44,000		44,000
TOTAL	132,209	66,105	0	66,104

Description	(a) Revenue and expenses	(b) Net investment income	(c) Adjusted net income	(d) Charitable disbursements
(1) INVESTMENT MANAGEMENT FEES	180,045	180,045		
(2) GRANT COUNSELING - SRI	25,725			25,725
TOTAL	205,770	180,045	0	25,725

Description	(a) Revenue and expenses	(b) Net investment income	(c) Adjusted net income	(d) Charitable disbursements
(1) FEDERAL EXCISE TAX	70,800			
(2) FOREIGN TAXES PAID	52,774	52,774		
TOTAL	123,574	52,774	0	0

Description	(a) Revenue and expenses	(b) Net investment income	(c) Adjusted net income	(d) Charitable disbursements
(1) DIRECTOR LIABILITY INSURANCE	2,713			2,713
(2) FILING FEES	25			25
(3) POSTAGE	9			9
TOTAL	2,747	0	0	2,747

Description	Type	BOY Amount	EOY Amount	Fair Market Value
PERMAL FIXED INCOME HOLDINGS (ERISA) LTD	END OF YEAR MARKET VALUE	63,361		
RI CAPITAL TTL RETURN FD CLB SER1	END OF YEAR MARKET VALUE	2,655,939	2,662,628	2,662,628
PRIVATE MARKETS FUND 2019 LP	END OF YEAR MARKET VALUE	897,645	1,628,789	1,628,789
PRIVATE MARKETS FUND 2021 LLC	END OF YEAR MARKET VALUE	73,498	235,822	235,822
RIIFL MULTI ASSET CORE PLUS FUND	END OF YEAR MARKET VALUE	29,302,564	25,950,835	25,950,835
RIIFL CORE BOND FUND	END OF YEAR MARKET VALUE	14,010,785	11,332,401	11,332,401
RIIFL UNCONSTRAINED BOND FUND	END OF YEAR MARKET VALUE	5,493,143	4,774,231	4,774,231
RIIFL REAL ESTATE EQUITY FUND	END OF YEAR MARKET VALUE	2,640,300	3,085,151	3,085,151
TOTAL		55,137,235	49,669,857	49,669,857

Description	Amount
(1) UNREALIZED LOSSES	5,700,370
TOTAL	5,700,370

Part IV

Capital Gains and Losses for Tax on Investment Income (continued)

(a) List and describe the kind(s) of property sold	(b) How acquired	(c) Date acquired	(d) Date sold	(e) Gross sales price	(f) Depreciation allowed	(g) Cost or other basis	(h) Gain or (loss)	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains or Losses
(5) FLOW THROUGH RIIFL MULTI ASSET CORE PLUS (SIR6)	PURCHASE			1,798,574		0	1,798,574			0	1,798,574
(6) FLOW THROUGH RIIFL MULTI ASSET CORE PLUS (SIR7)	PURCHASE			234,577		0	234,577			0	234,577
(7) FLOW THROUGH RIIFL UNCONSTRAINED BOND FUND	PURCHASE			133,447		0	133,447			0	133,447
(8) FLOW THROUGH RIIFL CORE BOND FUND	PURCHASE			0		798,095	(798,095)			0	(798,095)
(9) FLOW THROUGH RIIFL REAL ESTATE EQUITY FUND	PURCHASE			18,268		0	18,268			0	18,268
(10) ENTRUSTPERMAL FIXED INCOME HLDGS (ERISA)	PURCHASE			69,603		69,710	(107)			0	(107)

Name	Address	Title, and average hours per week devoted to position	Compensation (If not paid, enter -0-)	Contributions to employee benefit plans and deferred compensation	Expense account, other allowances
PHIL DONALDSON	100 FOURTH AVE N, BAYPORT, MN 55003	DIRECTOR, 1.0	0	0	0
JAY LUND	100 FOURTH AVE N, BAYPORT, MN 55003	DIRECTOR, 1.0	0	0	0
JEANNE JUNKER	100 FOURTH AVE N, BAYPORT, MN 55003	DIRECTOR, 1.0	0	0	0
TRACY GIBSON	100 FOURTH AVE N, BAYPORT, MN 55003	DIRECTOR, 1.0	0	0	0

Name and Address	Relationship	Foundation status	Purpose	Amount
AIN DAH YUNG (OUR HOME) CENTER 1089 PORTLAND AVENUE SAINT PAUL, MN 55104		PC	AIN DAH YUNG CENTER'S HOUSING ACCESS AND STABILITY FOR AMERICAN INDIAN YOUTH	15,000
AVIVO 1900 CHICAGO AVE. S. MINNEAPOLIS, MN 55404		PC	AVIVO VILLAGE HOMELESS SHELTER	20,000
BACK ON MY FEET 100 S BROAD STREET, SUITE 2136 PHILADELPHIA, PA 19110		PC	WORKFORCE DEVELOPMENT PROGRAM (AKA "NEXT STEPS")	10,000
BOLTON REFUGE HOUSE INC P.O. BOX 482 EAU CLAIRE, WI 54702-0482		PC	BOLTON REFUGE HOUSE REQUEST FOR GENERAL OPERATING FUNDS FOR 2022	5,000
CHILD CRISIS ARIZONA 817 N. COUNTRY CLUB DRIVE MESA, AZ 85201		PC	CARING FOR HOMELESS CHILDREN AND YOUTH	5,000
COMUNIDADES LATINAS UNIDAS EN SERVICIO INC 797 E 7TH STREET SAINT PAUL, MN 55106		PC	GENERAL OPERATING SUPPORT	10,000
COTS 26 PETERBORO SUITE 100 DETROIT, MI 48201		PC	GENERAL OPERATING FOR SHELTER AND HOUSING PROGRAMS	10,000
DUBUQUE COMMUNITY Y 35 NORTH BOOTH STREET DUBUQUE, IA 52001		PC	CRISIS SERVICES PROGRAM	5,000
FACE TO FACE HEALTH & COUNSELING SERVICE, INC 1165 ARCADE STREET SAINT PAUL, MN 55106		PC	FACE TO FACE GENERAL OPERATING SUPPORT	20,000
HABITAT FOR HUMANITY INTERNATIONAL INC PO BOX 716 DES MOINES, IA 50321		PC	GDM HABITAT FOR HUMANITY AFFORDABLE HOMEOWNERSHIP PROGRAM	5,000
HAWTHORN HILL 3001 GRAND AVE DES MOINES, IA 50312		PC	NEW DIRECTIONS SHELTER	5,000
HOME OPPORTUNITIES MADE EASY, INCORPORATED 1618 6TH AVE DES MOINES, IA 50314		PC	HOUSING COUNSELING AND EDUCATION	10,000
HOMELESS YOUTH CONNECTION 9950 W. VAN BUREN STREET, STE. 114 AVONDALE, AZ 85323		PC	EMPOWERING YOUTH FOR THE FUTURE (EYFTF)	5,000
HOPE 4 YOUTH 2191 NORTHDALD BLVD NW COON RAPIDS, MN 55433		PC	HOPE PLACE – TRANSITIONAL HOUSING FOR YOUTH	10,000
HOPE COMMUNITY, INC. 611 E. FRANKLIN AVENUE MINNEAPOLIS, MN 55404		PC	HOPE COMMUNITY: CREATING CONNECTIONS TO STRENGTHEN THE POWER OF COMMUNITY MEMBERS AND COMMUNITIES	15,000
HOPE GOSPEL MISSION INC P.O. BOX 1127 EAU CLAIRE, WI 54702		PC	PROGRAMS TO HELP THE HOMELESS	5,625
HOUSINGLINK 1400 VAN BUREN ST NE, STE 215 MINNEAPOLIS, MN 55413		PC	BEYOND BACKGROUNDS: CREATING EQUITABLE ACCESS TO RENTAL HOUSING	10,000
MARIA HOUSE 2100 ASBURY ROAD, SUITE 8 DUBUQUE, IA 52001		PC	EMERGENCY SHELTER BASIC NEEDS	5,000
MARIA HOUSE 2100 ASBURY ROAD, SUITE 8 DUBUQUE, IA 52001		PC	FIRST STEPS TO SELF-SUFFICIENCY	5,000
MODEL CITIES OF ST. PAUL, INC. 839 UNIVERSITY AVE SAINT PAUL, MN 55104		PC	MODEL CITIES' HOUSING ACCESS & STABILITY: GENERAL OPERATING SUPPORT	15,000
NORTHCOUNTRY COOPERATIVE FOUNDATION 2171 UNIVERSITY AVENUE WEST SUITE 300 ST. PAUL, MN 55114		PC	AFFORDABLE, COOPERATIVE HOUSING IN TWIN CITIES AND ST. CROIX VALLEY REGION	15,000

Name and Address	Relationship	Foundation status	Purpose	Amount
SERVEMINNESOTA 120 SOUTH 6TH STREET, SUITE 2260 MINNEAPOLIS, MN 55402		PC	HEADING HOME CORPS IN THE EAST METRO	10,000
SOLID GROUND 3521 CENTURY AVENUE NORTH WHITE BEAR LAKE, MN 55110- 5689		PC	HOUSING STABILITY	20,000
ST. CROIX VALLEY HABITAT FOR HUMANITY 749 RYAN DRIVE HUDSON, WI 54016		PC	CONSTRUCTION OF SAFE, AFFORDABLE HOUSING IN PIERCE & ST. CROIX COUNTIES	30,000
THE LINK 1210 GLENWOOD AVE NORTH MINNEAPOLIS, MN 55405		PC	SUPPORTIVE HOUSING	20,000
THE SALVATION ARMY PO BOX 36006 DALLAS, TX 75235		PC	KEEPING GARLAND FAMILIES STABLY HOUSED	5,000
TUBMAN 4432 CHICAGO AVENUE SOUTH MINNEAPOLIS, MN 55407		PC	SURVIVOR-CENTERED SHELTER AND HOUSING	20,000
TWIN CITIES HABITAT FOR HUMANITY INC. 1954 UNIVERSITY AVENUE WEST ST. PAUL, MN 55104		PC	MULTIPLYING THE IMPACT CAMPAIGN	200,000
TWO RIVERS COMMUNITY LAND TRUST P.O. BOX 25451 WOODBURY, MN 55125		PC	TWO RIVERS COMMUNITY LAND TRUST - OWN SWEET HOME 2022	10,000
WEST CENTRAL WISCONSIN COMMUNITY ACTION AGENCY INC 525 2ND ST. PO BOX 308 GLENWOOD CITY, WI 54013		PC	HOMELESS INTERVENTION	8,250
YOUNG MENS CHRISTIAN ASSOCIATION OF GREATER TWIN CITIES 651 NICOLLET MALL SUITE 500 MINNEAPOLIS, MN 55402		PC	YMCA RAPID REHOUSING PROGRAM IN RAMSEY AND WASHINGTON COUNTIES	15,000
YOUNG WOMENS CHRISTIAN ASSOCIATION OF ST. PAUL MINNESOTA 375 SELBY AVENUE ST PAUL, MN 55102		PC	GENERAL OPERATING SUPPORT	15,000
ALIGHT PO BOX 1002 MINNEAPOLIS, MN 55480-1002		PC	UKRAINE EMERGENCY RESPONSE	20,000
AMERICAN NATIONAL RED CROSS 1201 WEST RIVER PARKWAY MINNEAPOLIS, MN 55454		PC	SOUTHERN AND MIDWEST TORNADOES	50,000
AMERICAN NATIONAL RED CROSS 1201 WEST RIVER PARKWAY MINNEAPOLIS, MN 55454		PC	HURRICANE IAN DISASTER RELIEF	37,500
GLOBALGIVING 1 THOMAS CIRCLE NW SUITE 800 WASHINGTON , DC 20005		PC	UKRAINE CRISIS RELIEF FUND	15,000
WORLD CENTRAL KITCHEN, INC. 200 MASSACHUSETTS AVE. NW 7TH FLOOR WASHINGTON , DC 20005		PC	UKRAINE RELIEF EFFORTS	15,000
WORLD CENTRAL KITCHEN, INC. 200 MASSACHUSETTS AVE. NW 7TH FLOOR WASHINGTON , DC 20005		PC	HURRICANE IAN DISASTER RELIEF	37,500
30000 FEET 1351 ARCADE STREET ST PAUL, MN 55106		PC	AFTER-SCHOOL ACADEMIC SUPPORT FOR BLACK YOUTH	10,000
ACHIEVE!MINNEAPOLIS 2829 UNIVERSITY AVE. STE. 850 MINNEAPOLIS, MN 55414		PC	SAINT PAUL PUBLIC SCHOOLS (SPPS) CAREER PATHWAY CENTERS (CPCS)	20,000
ASSET INC 2403 SIDNEY ST. STE 221		PC	PARTNERSHIPS TO ADVANCE LEARNING IN STEM (PALS)	15,000

Name and Address	Relationship	Foundation status	Purpose	Amount
PITTSBURGH, PA 15203				
BESTPREP 7100 NORTHLAND CIRCLE NORTH SUITE 306 BROOKLYN PARK, MN 55428		PC	CLASSROOM PLUS PROGRAM: TRADES CAREERS CURRICULUM DEVELOPMENT	5,000
BOY SCOUTS OF AMERICA NATIONAL COUNCIL 6202 BLOOMINGTON ROAD ST PAUL, MN 55111		PC	GENERAL OPERATION SUPPORT FOR SCOUTING PROGRAMMING	50,000
BOYS & GIRLS CLUB OF THE GREATER CHIPPEWA VALLEY, INC. 615 24TH AVE W MENOMONIE, WI 54751		PC	UPDATE AND ENHANCE SAFETY COMMUNICATION	4,000
BREAKTHROUGH TWIN CITIES 2051 LARPENTEUR AVENUE EAST SAINT PAUL, MN 55109		PC	COLLEGE PREP FOR HIGHLY MOTIVATED, UNDER- RESOURCED YOUTH	20,000
BUILDERS EDUCATION SERVICES AND TRAINING OF MICHIGAN 6427 CENTURION STE. 100 LANSING, MI 48917		PC	CULTIVATING, EDUCATING AND RECRUITING. BUILDING THE WORKFORCE OF TODAY AND TOMORROW	5,000
CHILDREN'S MEDICAL CENTER FOUNDATION 2777 N. STEMMONS FREEWAY SUITE 1700 DALLAS, TX 75207		PC	CHILDREN'S HEALTH LIBRARY AND EDUCATIONAL SERVICES	10,000
COMMUNITIES IN SCHOOLS OF THE TWIN CITIES 161 ST. ANTHONY AVE STE 910 MINNEAPOLIS, MN 55103		PC	COMMUNITIES IN SCHOOLS IN THE EAST METRO	10,000
DUBUQUE COUNTY HISTORICAL SOCIETY 350 E. 3RD STREET DUBUQUE, IA 52001		PC	PRESERVE THE WONDER CAPITAL CAMPAIGN: RIVERS TO THE SEA GALLERY 2.0	5,000
DUNWOODY COLLEGE OF TECHNOLOGY 818 DUNWOODY BLVD MINNEAPOLIS, MN 55403-1141		PC	DUNWOODY'S PATHWAYS TO CAREERS PROGRAM (P2C)	30,000
EMERGE COMMUNITY DEVELOPMENT 1834 EMERSON AVE. N MINNEAPOLIS, MN 55411		PC	MANUFACTURING FOUNDATIONS CAREER PATHWAY	15,000
FOUNDATION FOR BAYPORT PUBLIC LIBRARY 582 4TH ST N ST BAYPORT, MN 55003		PC	FOUNDATION FOR BAYPORT PUBLIC LIBRARY RAISING FUNDS FOR THE BAYPORT PUBLIC LIBRARY	28,000
FOUNDATION FOR BAYPORT PUBLIC LIBRARY 582 4TH ST N ST BAYPORT, MN 55003		PC	BAYPORT PUBLIC LIBRARY: BUILDING THE NEXT CHAPTER	37,500
GENESYS WORKS - TWIN CITIES 445 MINNESOTA ST STE 720 ST. PAUL, MN 55101		PC	PROVIDING PATHWAYS TO CAREER SUCCESS FOR STUDENTS IN UNDERSERVED COMMUNITIES	20,000
GIRL SCOUTS OF EASTERN IOWA AND WESTERN ILLINOIS INC 21700 GIRL SCOUT ROAD EPWORTH, IA 52045		PC	GIRL SCOUT LEADERSHIP PROGRAM IN DUBUQUE	5,000
GIRL SCOUTS OF MINNESOTA AND WISCONSIN RIVER VALLEYS INC 400 SOUTH ROBERT STREET ST. PAUL, MN 55107		PC	GIRL SCOUT LEADERSHIP EXPERIENCE	50,000
GOODWILL INDUSTRIES, INC. 553 FAIRVIEW AVENUE NORTH ST. PAUL, MN 55104		PC	YOUTH BUILD CONSTRUCTION TRAINING PROGRAM	20,000
IOWA JAG INC 1111 9TH ST. SUITE 268 DES MOINES, IA 50314		PC	IJAG: CREATING INCLUSIVE CAREER PATHWAYS FOR UNDESERVED YOUTH	5,000
IOWA STATE UNIVERSITY FOUNDATION 2156 GILMAN HALL, 2415		PC	IOWA STATE UNIVERSITY SCIENCE BOUND – DES MOINES PUBLIC SCHOOL DISTRICT	10,000

Name and Address	Relationship	Foundation status	Purpose	Amount
OSBORN DR. AMES, IA 50011				
JUNIOR ACHIEVEMENT OF THE HEARTLAND, INC. 900 JACKSON STREET, LL5-2F DUBUQUE, IA 52001		PC	JA CORE MISSION PROGRAMS - A CAREER AND WORK READINESS INITIATIVE	5,000
JUNIOR ACHIEVEMENT OF WISCONSIN, NORTHWEST AREA 2004 HIGHLAND AVENUE SUITE 2C EAU CLAIRE, WI 54701		PC	GENERAL OPERATING SUPPORT FOR DUNN COUNTY STUDENTS	4,000
MINNESOTA CHILDREN'S MUSEUM 10 W 7TH STREET ST. PAUL, MN 55102		PC	POWERING PLAY AT THE MINNESOTA CHILDREN'S MUSEUM	20,000
MINNESOTA CHILDREN'S MUSEUM 10 W 7TH STREET ST. PAUL, MN 55102		PC	MINNESOTA CHILDREN'S MUSEUM'S REVIVE CAMPAIGN	50,000
MINNESOTA COMPUTERS FOR SCHOOLS 504 MALCOLM AVE SE, SUITE 100 MINNEAPOLIS, MN 55414		PC	CORE:IT WORKFORCE DEVELOPMENT AND SKILLS TRAINING FOR ADULTS IN THE TWIN CITIES AND EASTERN MINNESOTA	10,000
NORTHWOOD TECHNICAL COLLEGE FOUNDATION 1900 COLLEGE DRIVE RICE LAKE, WI 54868		PC	MECHATRONICS: POWER TRANSMISSION COMPONENTRY	10,000
PAGE COUNTY SHERIFF'S OFFICE FOUNDATION PO BOX 713 LURAY, VA 22835-1449		PC	PAGE COUNTY YOUTH ENGAGEMENT	5,000
PARTNERSHIP PLAN FOR STILLWATER AREA PUBLIC SCHOOLS 1875 GREELEY STREET S STILLWATER, MN 55082		PC	PATHWAYS FOR STILLWATER AREA HIGH SCHOOL - 2022-23 SCHOOL YEAR	20,000
PHIPPS CENTER FOR THE ARTS, INC. 109 LOCUST STREET HUDSON, WI 54016		PC	GENERAL OPERATING SUPPORT	12,000
READING PARTNERS 700 RAYMOND AVENUE SUITE 160 ST. PAUL, MN 55114		PC	READING PARTNERS FOUNDATIONAL LITERACY TUTORING	10,000
SAINT PAUL & MINNESOTA FOUNDATION 101 FIFTH STREET EAST SUITE 2400 ST. PAUL, MN 55101		PC	COLLEGEBOUND SAINT PAUL: FUND FOR THE FUTURE CAMPAIGN	25,000
SCIENCE FROM SCIENTISTS, INC 9001 E BLOOMINGTON FWY UNIT 139 BLOOMINGTON, MN 55420		PC	SCIENCE FROM SCIENTISTS' SCIENTIST-LED STEM EDUCATION PROGRAMS IN MINNEAPOLIS/ST.PAUL/ST.CROIX VALLEY SCHOOLS	15,000
SCIENCE MUSEUM OF MINNESOTA 120 KELLOGG BLVD W SAINT PAUL, MN 55102		PC	EQUITABLE ACCESS TO STEM EDUCATION	60,000
STUDIONE-EIGHTY 3017 4TH AVE. S. MINNEAPOLIS, MN 55408-2460		PC	LAKE STREET WORKS PROJECT FOR TRADES AND LIFE SKILLS TRAINING FOR URBAN YOUTH IN SOUTH MINNEAPOLIS	5,000
SUMMIT ACADEMY OIC 935 OLSON MEMORIAL HIGHWAY MINNEAPOLIS, MN 55405		PC	CREATING A BLACK MIDDLE CLASS THROUGH NO-COST TRAINING IN THE SKILLED TRADES	20,000
THE ARC OF DUNN COUNTY, INC. 1502 9TH ST E MENOMONIE, WI 54751		PC	GENERAL OPERATING SUPPORT	2,500
THINKSELF, INC. 2375 UNIVERSITY AVE W SUITE 110 SAINT PAUL, MN 55114		PC	LITERACY INSTRUCTION FOR DEAF, DEAFBLIND, AND HARD OF HEARING ADULTS	10,000
THOMAS E & EDNA D CARPENTER FOUNDATION 12805 ST. CROIX TRAIL SOUTH HASTINGS, MN 55033		EOF	CARPENTER NATURE CENTER GENERAL OPERATING 2021-2022	16,000

Name and Address	Relationship	Foundation status	Purpose	Amount
URBAN BOATBUILDERS, INC. 2288 UNIVERSITY AVENUE WEST SAINT PAUL, MN 55438		PC	APPRENTICESHIP PROGRAM FOR UNDERSERVED YOUTH	10,000
UW-PLATTEVILLE FOUNDATION PO BOX 254 PLATTEVILLE, WI 53818		PC	WOMEN IN STEM K-12 OUTREACH & PROGRAMMING 2022/2023	5,000
WASHINGTON COUNTY HISTORICAL SOCIETY 1862 S. GREELEY STREET STILLWATER, MN 55082		PC	OPERATIONAL FUNDING	6,000
YOUNG MENS CHRISTIAN ASSOCIATION OF GREATER TWIN CITIES 651 NICOLLET MALL SUITE 500 MINNEAPOLIS, MN 55402		PC	2022 ACCESSIBLE CAMPING, FITNESS, AND LEADERSHIP EXPERIENCES FOR YOUTH, FAMILIES, AND SENIORS	50,000
ALLINA HEALTH FOUNDATION 2925 CHICAGO AVE. MINNEAPOLIS, MN 55407		PC	COURAGE KENNY FUND: SERVICES FOR PEOPLE WITH DISABILITIES AND CHRONIC HEALTH CONDITIONS IN THE ST. CROIX VALLEY	45,000
ALLINA HEALTH FOUNDATION 2925 CHICAGO AVE. MINNEAPOLIS, MN 55407		PC	UNITED HOSPITAL FUND: \$6.6M MULTI-PHASE MENTAL HEALTH AND ADDICTION CAMPAIGN - SUPPORT CONSIDERATION OF PHASE II - REMODEL INPATIENT UNIT	25,000
CAMP ALBRECHT ACRES OF THE MIDWEST, INC. PO BOX 50 SHERRILL, IA 52073		PC	SUMMER CAMP FOR INDIVIDUALS WITH SPECIAL NEEDS	5,000
CAMP ALBRECHT ACRES OF THE MIDWEST, INC. PO BOX 50 SHERRILL, IA 52073		PC	RESPIRE WEEKENDS FOR INDIVIDUALS WITH SPECIAL NEEDS	5,000
CANVAS HEALTH INC. 7066 STILLWATER BLVD N OAKDALE, MN 55128		PC	GENERAL OPERATIONS FOR COMMUNITY MENTAL HEALTH AGENCY	15,000
CHERYL KAY FOUNDATION 661 ALLEGHENY AVENUE OAKMONT, PA 15139		PC	IN-HOME CARING HANDS	5,000
CHILDRENS DENTAL SERVICES INC 636 BROADWAY ST. NE MINNEAPOLIS, MN 55413		PC	EXPANDING CRITICAL DENTAL CARE TO 550 CHILDREN AND FAMILIES IN WASHINGTON COUNTY, EAST TWIN CITIES, AND 50 IN WESTERN WISCONSIN.	20,000
CHILDRENS HEALTH CARE FOUNDATION 5901 LINCOLN DR. CBC-3-FOUN EDINA, MN 55436		PC	CHILDREN'S MINNESOTA INPATIENT MENTAL HEALTH UNIT	25,000
CHIPPEWA VALLEY HEALTH CLINIC INC 1030 OAK RIDGE DRIVE EAU CLAIRE, WI 54701		PC	DIRECT AND INDIRECT PATIENT SERVICES IN THE CHIPPEWA VALLEY	5,000
COMMUNITY THREAD 2300 ORLEANS ST. W. STILLWATER, MN 55082		PC	GENERAL OPERATIONS INCLUDING THE BAYPORT SENIOR CENTER	31,000
DENTAL CONNECTIONS, INC. 1111 9TH ST, STE 190 DES MOINES, IA 50314		PC	NOLDEN GENTRY DENTAL CLINIC	10,000
DURIDE 2728 ASBURY RD STE 330 DUBUQUE, IA 52001		PC	GROWING TOWARD THE FUTURE. SUPPORTING A RETURN TO NORMAL WHILE EXPANDING OUR SERVICES AND PROGRAM	5,000
FAMILYMEANS 1875 NORTHWESTERN AVE. S STILLWATER, MN 55082		PC	GENERAL OPERATING SUPPORT	45,000
FAMILYMEANS 1875 NORTHWESTERN AVE. S STILLWATER, MN 55082		PC	FAMILYMEANS PROGRAM ENDOWMENT CAMPAIGN - 4-YEAR REQUEST	25,000
FREE CLINIC OF PIERCE AND ST CROIXCOUNTIES INC P.O. BOX 745 RIVER FALLS, WI 54022		PC	HEALTHCARE AND MEDICATIONS FOR THE MEDICALLY UNDERSERVED.	8,000

Name and Address	Relationship	Foundation status	Purpose	Amount
HAMM MEMORIAL PSYCHIATRIC CLINIC 408 SAINT PETER ST #429 SAINT PAUL, MN 55102		PC	GENERAL OPERATING SUPPORT TO BUILD CAPACITY IN EQUITABLE MENTAL HEALTH CARE	20,000
HCI FOUNDATION, DBA EVERYSTEP 3000 EASTON BLVD. DES MOINES, IA 50317		PC	COMMUNITY NURSING CLINICS	5,000
LAKEVIEW HEALTH FOUNDATION 927 CHURCHILL ST W STILLWATER, MN 55082		PC	SUPPORT FOR LAKEVIEW HEALTH PERMANENT SCV AMBULANCE BASE - FOR WASHINGTON CO AND WESTERN WI	25,000
LAKEVIEW HEALTH FOUNDATION 927 CHURCHILL ST W STILLWATER, MN 55082		PC	LAKEVIEW HEALTH SCHOLARSHIPS AND ST. CROIX VALLEY FAITH COMMUNITY NURSING PROGRAM	32,000
MINNESOTA RECOVERY CONNECTION 800 TRANSFER ROAD SUITE 31 SAINT PAUL, MN 55114		PC	MINNESOTA RECOVERY CONNECTION GENERAL OPERATIONS & CAPACITY BUILDING	10,000
NAMI NORTH TEXAS 2812 SWISS AVENUE DALLAS, TX 75204		PC	ENDING THE SILENCE FOR STUDENTS, EDUCATORS, AND FAMILIES: A MENTAL HEALTH WELLNESS EDUCATION PROGRAM	5,000
NEIGHBORHOOD HEALTHSOURCE 3300 FREMONT AVE N MINNEAPOLIS, MN 55412		PC	PRIMARY CARE FOR LOW-INCOME FAMILIES	10,000
NORTHEAST YOUTH AND FAMILY SERVICES 3490 LEXINGTON AVE N ST. PAUL, MN 55126		PC	GENERAL OPERATING GRANT	15,000
PHOENIX CHILDRENS HOSPITAL FOUNDATION 2929 E. CAMELBACK RD. #122 PHOENIX, AZ 85016		PC	PHOENIX CHILDREN'S HOSPITAL: KEEP YOUR BABY SAFE PROGRAM	7,500
PORTICO HEALTHNET 1600 UNIVERSITY AVENUE W. SUITE 211 SAINT PAUL, MN 55104		PC	GENERAL OPERATING SUPPORT	8,000
RAICES SAGRADAS COMMUNITY MENTAL HEALTH 1515 E. LAKE STREET SUITE 211 MINNEAPOLIS, MN 55407		PC	GENERAL OPERATING SUPPORT FOR NO-COST CULTURALLY SENSITIVE THERAPY	10,000
RECLAIM 2446 UNIVERSITY AVE. W. SUITE 104 SAINT PAUL, MN 55114		PC	MENTAL HEALTH CARE FOR QUEER AND TRANS YOUTH	15,000
REGIONS HOSPITAL FOUNDATION 640 JACKSON STREET MS 11202C SAINT PAUL, MN 55101		PC	REGIONS RESPONDS FIRST CAMPAIGN	25,000
RELATE, INC. 5125 COUNTY ROAD 101 SUITE 300 MINNETONKA, MN 55345		PC	FREE AND REDUCED-FEE MENTAL HEALTH SERVICES FOR UNDER AND UNINSURED CLIENTS	10,000
RONALD MCDONALD HOUSE CHARITIES OF PITTSBURGH AND MORGANTOWN, INC. 451 44TH STREET PENTHOUSE FLOOR PITTSBURGH, PA 15201		PC	RONALD MCDONALD CARE MOBILE SERVING CHILDREN IN THE GREATER PITTSBURGH COMMUNITY	5,000
TURNINGPOINT FOR VICTIMS OF DOMESTIC AND SEXUAL VIOLENCE INC 117 NORTH MAIN STREET RIVER FALLS, WI 54022		PC	CRISIS SERVICES, COUNSELING, AND HOUSING SUPPORT FOR VICTIMS AND SURVIVORS OF DOMESTIC VIOLENCE AND SEXUAL ASSAULT	10,000
WAYSIDE HOUSE, INC. 3705 PARK CENTER BLVD SAINT LOUIS PARK, MN 55416		PC	BUILDING HEALTHY FAMILIES WITH INTEGRATED HEATH CARE	10,000
WELLSHARE INTERNATIONAL 122 WEST FRANKLIN AVE S SUITE 510		PC	INTEGRATIVE SOLUTIONS TO ADVANCE HEALTH EQUITY	15,000

Name and Address	Relationship	Foundation status	Purpose	Amount
MINNEAPOLIS, MN 55404				
WESTFIELDS HOSPITAL FOUNDATION 535 HOSPITAL RD. NEW RICHMOND, WI 54017		PC	ST. CROIX VALLEY-WIDE CLINICAL SIMULATION EDUCATION	30,000
YOUTH SERVICE BUREAU INC 7064 W. PT. DOUGLAS RD SUITE 201 COTTAGE GROVE, MN 55016		PC	GENERAL OPERATING - WITH EMPHASIS ON YOUTH INTERVENTION SERVICES	10,000
360 COMMUNITIES 501 E HWY 13 STE 112 BURNSVILLE, MN 55337		PC	360 COMMUNITIES FOOD SHELVES	5,000
AGATE HOUSING AND SERVICES 2309 NICOLLET AVE MINNEAPOLIS, MN 55404		PC	HELP WITH HUNGER AND HOUSING	5,000
AMHERST H WILDER FOUNDATION 451 LEXINGTON PARKWAY NORTH SAINT PAUL, MN 55104		PC	GENERAL OPERATING SUPPORT FOR WILDER'S HEALTHY AGING & CAREGIVING SERVICES	20,000
AMHERST H WILDER FOUNDATION 451 LEXINGTON PARKWAY NORTH SAINT PAUL, MN 55104		PC	CAMPAIGN FOR FAMILIES	50,000
APPETITE FOR CHANGE, INC 1200 WEST BROADWAY AVENUE #250 MINNEAPOLIS, MN 55411		PC	COMMUNITY COOKS MEAL BOX PROGRAM	20,000
ARIZONA VETERANS MISSION GROUP 8010 E. MCDOWELL RD SUITE 101 SCOTTSDALE, AZ 85257		PC	MISSION HERO HELP	7,500
BASIC NEEDS INC. OF SOUTH WASHINGTON COUNTY 445 BROADWAY AVE ST PAUL PARK, MN 55071		PC	EXPANDING FOOD PROGRAM	8,000
COMMUNITY EMERGENCY ASSISTANCE PROGRAM (CEAP) 7051 BROOKLYN BOULEVARD BROOKLYN CENTER, MN 55429		PC	CEAP MOBILE FOOD PROGRAM	5,000
COUNCIL ON DOMESTIC VIOLENCE FOR PAGE COUNTY INC 216 W MAIN ST LURAY, VA 22835-1235		PC	GENERAL OPERATING FUNDS TO SUPPORT DOMESTIC AND SEXUAL VIOLENCE VICTIMS AND VIOLENCE PREVENTION	8,500
DES MOINES AREA RELIGIOUS COUNCIL 100 ARMY POST ROAD DES MOINES,, IA 50315		PC	DMARC FOOD PANTRY NETWORK	5,000
EAT GREATER DES MOINES 501 SW 7TH ST STE G DES MOINES, IA 50309		PC	LOCAL FOOD AND HUNGER RELIEF FOR GREATER DES MOINES	5,000
ETHNE 2509 DURANGO DRIVE CARROLLTON, TX 75010		PC	GROCERY KITS	5,000
EVERY MEAL 2723 PATTON RD ROSEVILLE, MN 55113		PC	WEEKEND FOOD PROGRAM	5,000
FAMILY PATHWAYS 6413 OAK STREET NORTH BRANCH, MN 55056		PC	SUPPORTING HEALTHY FOOD ACCESS IN THE SAINT CROIX VALLEY	10,000
FOOD BANK OF IOWA P.O. BOX 1517 DES MOINES, IA 50305		PC	FIGHTING CHILDHOOD HUNGER IN DES MOINES WITH EXPANSION TO ACCESS	5,000
FRIENDS IN NEED FOOD SHELF PO BOX 6 COTTAGE GROVE, MN 55016		PC	GENERAL OPERATING SUPPORT	5,000
GOOD IN THE HOOD 2101 CHICAGO AVENUE SOUTH MINNEAPOLIS, MN 55404		PC	FOOD PROGRAMS	5,000
GREENLIGHT FUND INC. 50 MILK STREET 16TH FLOOR		PC	GREENLIGHT TWIN CITIES	50,000

Name and Address	Relationship	Foundation status	Purpose	Amount
BOSTON, MA 02109				
HALLIE Q BROWN COMMUNITY CENTER, INC. 270 N KENT ST ST PAUL, MN 55102		PC	FUNDING FOR THE HQB BASIC NEEDS PROGRAM	10,000
HMONG AMERICAN FARMERS ASSOCIATION 149 THOMPSON AVENUE EAST SUITE 210 WEST SAINT PAUL, MN 55118		PC	HUNGER RELIEF FOR LOW-INCOME FOOD-INSECURE BIPOC FAMILIES THROUGH INCREASED ACCESS TO HEALTHY FOOD	10,000
INTERFAITH ACTION OF GREATER SAINT PAUL 1041 GRAND AVENUE, #312 ST PAUL, MN 55105		PC	DEPARTMENT OF INDIAN WORK EMERGENCY SERVICES	5,000
LEGACY COMMUNITY CENTER INC 26 W. GRAND AVENUE CHIPPEWA FALLS, WI 54729		PC	AGNES' TABLE	5,000
LOAVES AND FISHES TOO 721 KASOTA AVENUE SE MINNEAPOLIS, MN 55414		PC	FREE, HEALTHY MEALS FOR MINNESOTANS IN NEED.	10,000
MEALS OF JOY 501 EAST PLAZA CIRCLE SUITE 15 LITCHFIELD PARK, AZ 85340		PC	MEALS OF JOY	10,000
MERRICK COMMUNITY SERVICES 1669 ARCADE STREET NORTH SUITE 4 ST PAUL, MN 55106		PC	GENERAL OPERATING SUPPORT FOR FOOD AND HOUSING INSECURE INDIVIDUALS AND FAMILIES ON THE EAST SIDE OF SAINT PAUL	5,000
NEIGHBORHOOD HOUSE 179 ROBIE STREET EAST ST PAUL, MN 55107		PC	GENERAL OPERATIONS WITH AN EMPHASIS ON HOMELESSNESS AND HUNGER	10,000
NORTH COUNTRY FOOD ALLIANCE PO BOX 7074 MINNEAPOLIS, MN 55407		PC	EXPANDED LOCAL PRODUCE RECOVERY TO SERVE HUNGER RELIEF PARTNERS IN THE EAST METRO IN 2023	5,000
OPEN ARMS OF MINNESOTA 2500 BLOOMINGTON AVENUE MPLS, MN 55404		PC	OPENING OUR ARMS WIDER TO NOURISH OUR NEIGHBORS: A CAPACITY CAPITAL CAMPAIGN	50,000
SABATHANI COMMUNITY CENTER 310 E. 38TH STREET MINNEAPOLIS, MN 55409		PC	CLIENT-CHOICE MODEL FOOD SHELF AT SABATHANI COMMUNITY CENTER	10,000
SECOND HARVEST HEARTLAND 7101 WINNETKA AVE. N. BROOKLYN PARK, MN 55428		PC	CULTURALLY CONNECTED FOODS PROJECT	15,000
SHENANDOAH AREA AGENCY ON AGING INC 207 MOSBY LANE FRONT ROYAL, VA 22630		PC	NUTRITIONAL SUPPORT FOR SENIORS - LURAY, VA	15,000
SOUTH OAKLAND SHELTER 46156 WOODWARD AVE PONTIAC, MI 48342		PC	EMERGENCY FOOD PROGRAM	10,000
SOUTHERN ANOKA COMMUNITY ASSISTANCE 627 38TH AVE NE COLUMBIA HEIGHTS, MN 55421		PC	GENERAL OPERATIONS TO FIGHT FOOD INSECURITY IN ANOKA COUNTY AND NE MINNEAPOLIS	5,000
ST CROIX VALLEY FOODBANK INC PO BOX 377 HUDSON, WI 54016		PC	PRIMARIUS SOFTWARE SOLUTION FOR ST. CROIX VALLEY FOOD BANK	15,000
ST CROIX VALLEY FOODBANK INC PO BOX 377 HUDSON, WI 54016		PC	EQUITABLE ACCESS TO FOOD IN WESTERN WISCONSIN	15,000
STEPPING STONES OF DUNN COUNTY INC 1602 STOUT RD. MENOMONIE, WI 54751		PC	GENERAL OPERATING EXPENSES IN ORDER TO MAINTAIN ITS STEPPING STONES' THREE PROGRAMS: FOOD PANTRY, EMERGENCY SHELTER AND COMMUNITY CONNECTIONS.	5,625
THE FOOD GROUP MINNESOTA INC 8501 54TH AVENUE NORTH NEW HOPE, MN 55428		PC	GENERAL OPERATIONS FOR OUR HUNGER RELIEF PROGRAMS	15,000

Name and Address	Relationship	Foundation status	Purpose	Amount
THE OPEN DOOR 3910 RAHN RD EAGAN, MN 55343		PC	DAKOTA COUNTY HUNGER RELIEF STRATEGIC EXPANSION	5,000
VALLEY OUTREACH 1911 CURVE CREST BLVD. WEST STILLWATER, MN 55082		PC	GENERAL OPERATING SUPPORT FOR VALLEY OUTREACH	10,000
YOUTHPRISE 3001 BROADWAY NE, #330 MINNEAPOLIS, MN 55413		PC	YOUTHPRISE GENERAL OPERATING	10,000

Name and Address	Relationship	Foundation status	Purpose	Amount
MINNESOTA CHILDREN'S MUSEUM 10 W 7TH STREET ST. PAUL, MN 55102		PC	MINNESOTA CHILDREN'S MUSEUM'S REVIVE CAMPAIGN	50,000
SAINT PAUL & MINNESOTA FOUNDATION 101 FIFTH STREET EAST SUITE 2400 ST. PAUL, MN 55114		PC	COLLEGEBOUND SAINT PAUL: FUND FOR THE FUTURE CAMPAIGN.	75,000
CHILDRENS HEALTH CARE FOUNDATION 5901 LINCOLN DR. CBC-3-FOUN EDINA, MN 55436		PC	CHILDREN'S MINNESOTA INPATIENT MENTAL HEALTH UNIT	25,000
FAMILYMEANS 1875 NORTHWESTERN AVE. S STILLWATER, MN 55082		PC	FAMILYMEANS PROGRAM ENDOWMENT CAMPAIGN - 4-YEAR REQUEST.	75,000
LAKEVIEW HEALTH FOUNDATION 927 CHURCHILL ST W STILLWATER, MN 55082		PC	SUPPORT FOR LAKEVIEW HEALTH PERMANENT SCV AMBULANCE BASE - FOR WASHINGTON CO AND WESTERN W1	25,000
EMMA NORTON SERVICES 670 NORTH ROBERT STREET SAINT PAUL, MN 55101		PC	HOUSING WITH MENTAL HEALTH SUPPORT IN THE EAST METRO.	50,000

Tax Exempt Entity Declaration and Signature for Electronic Filing

For calendar year 2021, or tax year beginning 12/01, 2021, and ending 11/30, 20 22

2021

Department of the Treasury
Internal Revenue Service

For use with Forms 990, 990-EZ, 990-PF, 990-T, 1120-POL, 4720, 8868, 5227, 5330, and 8038-CP

▶ Go to www.irs.gov/Form8453TE for the latest information.

Name of filer

ANDERSEN CORPORATE FOUNDATION

EIN or SSN

41-6020912

Part I Type of Return and Return Information

Check the box for the type of return being filed with Form 8453-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line of the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a	Form 990 check here	<input type="checkbox"/>	b	Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	
2a	Form 990-EZ check here	<input type="checkbox"/>	b	Total revenue, if any (Form 990-EZ, line 9)	2b	
3a	Form 1120-POL check here	<input type="checkbox"/>	b	Total tax (Form 1120-POL, line 22)	3b	
4a	Form 990-PF check here	<input checked="" type="checkbox"/>	b	Tax based on investment income (Form 990-PF, Part V, line 5)	4b	26,536
5a	Form 8868 check here	<input type="checkbox"/>	b	Balance due (Form 8868, line 3c)	5b	
6a	Form 990-T check here	<input type="checkbox"/>	b	Total tax (Form 990-T, Part III, line 4)	6b	
7a	Form 4720 check here	<input type="checkbox"/>	b	Total tax (Form 4720, Part III, line 1)	7b	
8a	Form 5227 check here	<input type="checkbox"/>	b	FMV of assets at end of tax year (Form 5227, Item D)	8b	
9a	Form 5330 check here	<input type="checkbox"/>	b	Tax due (Form 5330, Part II, line 19)	9b	
10a	Form 8038-CP check here	<input type="checkbox"/>	b	Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b	

Part II Declaration of Officer or Person Subject to Tax

- 11a I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.
- b If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that I am an officer of the above named entity or I am the person subject to tax with respect to (name of entity) _____, (EIN) _____, and that I have examined a copy of the 2021 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund.

Sign Here

		TREASURER
Signature of officer or person subject to tax	Date	Title, if applicable

Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above return and that the entries on Form 8453-TE are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The entity officer or person subject to tax will have signed this form before I submit the return. I will give a copy of all forms and information to be filed with the IRS to the officer or person subject to tax, and have followed all other requirements in Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

ERO's Use Only	ERO's signature <i>Voula Spyridis</i>	Date 10/4/2023	Check if also paid preparer <input checked="" type="checkbox"/>	Check if self-employed <input type="checkbox"/>	ERO's SSN or PTIN P01795600
	Firm's name (or yours if self-employed), address, and ZIP code	ERNST & YOUNG US LLP 155 N WACKER DRIVE, CHICAGO, IL 60606			EIN 34-6565596
					Phone no. (312) 879-2183

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	Firm's name ▶				Firm's EIN ▶
	Firm's address ▶				Phone no.