EXTENDED TO NOVEMBER 15, 2019 Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

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

For	_	ndar year 2018 or tax year beginning FEE	3 15, 2018	, and ending	DEC 31, 2018	
Na	ıme c	of foundation		• .	A Employer identification	number
						•
		UNIUM FOUNDATION .		Room/suite	82-4434752	
		and street (or P O box number if mail is not delivered to street	B Telephone number			
		5 NORTHWEST BOULEVARD,	(763) 354-	5500		
		town, state or province, country, and ZIP or foreign p	oostal code		C If exemption application is po	ending, check here
		MOUTH, MN 55441				
G	Cnec	k all that apply X Initial return Final return		former public charity	D 1 Foreign organizations	s, check here
		Address change	Amended return Name change		2 Foreign organizations me check here and attach co	eting the 85% test,
` 	Chec	k type of organization: X Section 501(c)(3) e		<u> </u>	1	
Ë	_		Other taxable private found		E If private foundation sta under section 507(b)(1)	
ı F		arket value of all assets at end of year J Account		X Accrual	F If the foundation is in a	
		· • • • • • • • • • • • • • • • • • • •	ther (specify)		under section 507(b)(1)	· · · · · · · · · · · · · · · · · · ·
	►\$	2,054,936. (Part I, colu	nn (d) must be on cash bas	ıs.)		
₹ P	art.	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
		necessarily equal the amounts in column (a))	expenses per books	income	income	(cash basis only)
	1	Contributions, gifts, grants, etc , received	2,919,210.		N/A	
	2	Check If the foundation is not required to attach Sch. 8 Interest on savings and temporary				
	3	cash investments	3,033.		,	STATEMENT 1
	4	Dividends and interest from securities	3,033.			CALLEGE OF THE
	Ι΄.	Gross rents Net rental income or (loss)				
, -	[·	Net gain or (loss) from sale of assets not on line 10	1986.01 +0-000.02 (1986.00) - 38.01 (1986.00)			
9	3 6	Gross sales price for all assets on line 6a				
٩	7	Capital gain net income (from Part IV, line 2)		0.		
ď	8	Net short-term capital enECEIVED	mæ menete	STATE OF THE		
	9	Income modifications		阿里拉拉斯 加斯斯斯		
	10a	and allowances			W. AP. III. THE TAIL	为《严禁性性》
	t	Less Cost of goods sold AUG 1 2 2019		de la companya de la	Sy event works	
	0	Gross profit of (loss)				
	11	Other Income OGDEN, UT	2 000 040			BARRAGE CONTACTOR
	12	Total Add lines I Incougn Li	1 2,922,243. 0.	0.		
	13.		0.	0.		<u> </u>
	15	Other employee salaries and wages Pension plans, employee benefits			`	
ý	1	Legal fees STMT 2	40,313.	0.		40,313.
Sasuen		Accounting fees				
, X		Other professional fees STMT 3	5,845.	0.		5,845.
ď	4	Interest				
<u> </u>	18	Taxes				
ţ	19	Depreciation and depletion		- <u></u>		
Ē	20	Occupancy		,		
A	21	Travel, conferences, and meetings			1	
and	22	Printing and publications	1 1 1 1 1 1			1 140
j.	23	Other expenses STMT 4	1,149.	0.		1,149.
rat	24	Total operating and administrative	47,307.	0.	•	47,307.
Ö	25	expenses Add lines 13 through 23 Contributions, gifts, grants paid	820,000.			820,000.
_	25	Total expenses and disbursements	320,000.	LANCESTON A RELIGIOUS PROBLEMS AND	I a. ve ma. 2 - ve ke jeriya ge	320,000+
	20	Add lines 24 and 25	867,307.	0.		867,307.
_	27	Subtract line 26 from line 12				NAME OF THE PARTY OF
,	1	Excess of revenue over expenses and disbursements	2,054,936.		THE PROPERTY.	125120000000000000000000000000000000000
	1	Net investment income (if negative, enter -0-)		0.	· 经产品的	DESCRIPTION OF THE PARTY OF THE
		Adjusted net income (if negative, enter -0-)	STERMAN STATE OF THE STATE OF T		N/A	海南北京的美国

823501 12-11-18 LHA For Paperwork Reduction Act Notice, see instructions

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DOMINIU1

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30

(must agree with end-of-year figure reported on prior year's return)

2 Enter amount from Part I, line 27a

3 Other increases not included in line 2 (itemize)

4 Add lines 1, 2, and 3

5 Decreases not included in line 2 (itemize)

5 0.

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

6 2, 054, 936.

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		INIUM FOUNDATION INDICATE OF The Control of the Co		t Income	·	82-44	134752	Page :
<u> </u>	(a) List and describe t	the kind(s) of property sold (for erehouse, or common stock, 200	example, real est		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	d (d) Da (mo , d	te sold lay, yr.)
<u>1a</u>					D Donation			
_b	NON	NE						
_ <u>c</u>				-				
_d				 	 		+	
	() 0	(f) Depreciation allowed	(n) C	ost or other basis		(h) Gain or (l	oss)	
	(e) Gross sales price	(or allowable)		expense of sale		((e) plus (f) min	us (g))	
a								
<u>b</u>						<u></u>		
_ <u>c</u>						·	· · · · · · · · · · · · · · · · · · ·	
_ <u>d</u>								
<u>e</u>	Complete only for assets showing	n dain in column (h) and owned	hy the foundation	n on 12/31/69		(I) Gains (Col. (h) g	ain minue	
_		(j) Adjusted basis	(k) E	xcess of col (i)	С.	ol (k), but not less Losses (from co	than -0-) or	
_	(i) FMV as of 12/31/69	as of 12/31/69	ove	r col (j), if any		FO2262 (ILOMI C	<u>-</u> -	
<u>a</u>		_ 	_					
<u>b</u>			_				_	
_ <u>c</u>			_					
_u e	'			-	- 		·	
2	Capital gain net income or (net cap	oital loss) { If gain, also e	nter in Part I, lind r -0- in Part I, lin	e 7 e 7	} 2			
3	Net short-term capital gain or (loss	`						
	If gain, also enter in Part I, line 8, o	column (c)			}			
F	If (loss), enter -0- in Part I, line 8 art: Val Qualification Ur	der Section 4940(e) fo	or Reduced	Tax on Net	Investment Inc	ome		
_	r optional use by domestic private						N/A	
					,			
11 5	ection 4940(d)(2) applies, leave thi	s part ofalik.						
	s the foundation liable for the secti			•	riod?		Yes	∟ No
1	Yes," the foundation doesn't qualify Enter the appropriate amount in ea				ntries		<u>-</u>	
<u> </u>	(a) Base period years	(b)	o mon donono bo	indicate the state of the state	(c)		(d)	<u></u>
(Base period years Calendar year (or tax year beginnin		distributions	Net value of no	oncharitable-use asset	s (col (b)	tribution ratio divided by col.	(c))
	2017							
_	2016		<u></u>					
_	2015			 				
_	<u>2014</u> 2013			-				
_	2013		 		· · · · ·		· <u> </u>	
2	Total of line 1, column (d)					2		
	Average distribution ratio for the 5	-year base period - divide the tot	al on line 2 by 5	0, or by the number	er of years			
	the foundation has been in existent	ce if less than 5 years				3		
4	Enter the net value of neacherstable	a use assets for 2019 from Part	V line 6					
4	Enter the net value of noncharitable	e-use assets for 20 to it offi Part	A, IIIE 3			4		
5	Multiply line 4 by line 3					5		
6	Enter 1% of net investment income	(1% of Part I, line 27b)				6		
7	Add lines 5 and 6					7		
•	rida ililoo o ana o							
8	Enter qualifying distributions from	Part XII. line 4				8		

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If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

8 Enter qualifying distributions from Part XII, line 4

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Яh

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 2018 or the tax year beginning in 2018? See the instructions for Part XIV If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If Yes attach a schedule listing their names and addresses

of each state as required by General Instruction G? If "No," attach explanation

Pa	If VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	İ		
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11_		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ▶ TIMOTHY ALLEN Telephone no. ▶ (763)		<u>-55</u>	<u>00</u>
	Located at ▶ 2905 NORTHWEST BLVD, STE 150, PLYMOUTH, MN ZIP+4 ▶55	441		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		. ▶	·
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank,		Yes	-
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? X Yes No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	·		
	for the benefit or use of a disqualified person)?			
	(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)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	<u> </u>		77
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		X
	Organizations relying on a current notice regarding disaster assistance, check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	<u> </u>		X
	before the first day of the tax year beginning in 2018?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			İ
	defined in section 4942(j)(3) or 4942(j)(5)).			
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? Yes X No			
_	If "Yes," list the years \(\bigs_{			
D	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) N/A	2b		
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
Ü		!		ŀ
2.	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
va	during the year? Yes X No			
ь	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after			
J	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2018) N/A	3b		
42	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	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 2018?	4b		X
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Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be R	equired (contin	ued)	
5a Quring the year, did the foundation pay or incur any amount to				Yes No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Y	es 🗶 No 🧗	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire		 	
any voter registration drive?			es 🔀 No 🔓	
(3) Provide a grant to an individual for travel, study, or other similar purposes	7	Y	es 🗶 No 🕌	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		ž	
4945(d)(4)(A)? See instructions		Yı	es 🛛 No 🔓	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			
the prevention of cruelty to children or animals?		Y	es 🗶 No 🞉	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	n Regulations	<u> </u>	
section 53 4945 or in a current notice regarding disaster assistance? See instru	ictions		N/A	5b
Organizations relying on a current notice regarding disaster assistance, check h				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr				
expenditure responsibility for the grant?	Ŋ	I/A Y	es 🔲 No 🏻	
If "Yes," attach the statement required by Regulations section 53.4945-5(d)			*	新海小野
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on)	
a personal benefit contract?		Y(es 🗶 No 🙎	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?	•		6b X
If "Yes" to 6b, file Form 8870.		,		
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Yı	_	A. dan 1
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b
8 Is the foundation subject to the section 4960 tax on payment(s) of more than $\$$	1,000,000 in remuneration or			
excess parachute payment(s) during the year?			s X No	
Part VIII Information About Officers, Directors, Truste Paid Employees, and Contractors	es, Foundation Mar	nagers, Highly		
List all officers, directors, trustees, and foundation managers and the	our componention			
List all officers, directors, dustees, and foundation managers and t	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other
	to position	enter -0-)	compensation	allowances
SEE STATEMENT 6		0.	0.	0.
SEE STATEMENT 0				<u>.</u>
		'		
Compensation of five highest-paid employees (other than those incl	uded on line 1). If none, e	enter "NONE."		
	(b) Title, and average		(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	account, other allowances
NONE	devoted to position		Compensation	4.1011411.000
NOTE				
		-		
				
otal number of other employees paid over \$50,000	 -	1		0
- Later the state of the state of the space of the state	<u> </u>		Form	990-PF (2018)
				, -/

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Total. Add lines 1 through 3

For	m 990-PF (2018) DOMINIUM FOUNDATION	82-	4434752 Page 8
P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, s	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	44,867. 1,261,371.
b	Average of monthly cash balances	1b	1,261,371.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	1,306,238.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 .		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,306,238.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	19,594.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	1,286,644.
6	Minimum investment return Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	56,401.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations, check here ▶ □ and do not complete this part)	ıd certaın	
1	Minimum investment return from Part X, line 6	1	56,401.
2a	Tax on investment income for 2018 from Part VI, line 5		
b	Income tax for 2018. (This does not include the tax from Part VI)]	
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	56,401.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	56,401.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	56,401.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	867,307.
b	Program-related investments - total from Part IX-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		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	867,307.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		_
	income Enter 1% of Part I, line 27b	5	0.

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867,307.

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

Adjusted qualifying distributions Subtract line 5 from line 4

4940(e) reduction of tax in those years

Part XIII · Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI,	ООТРА			
line 7				56,401.
2 Undistributed income, if any, as of the end of 2018			_	ļ
a Enter amount for 2017 only			0.	
ь Total for prior years:				
		0.	· · · · · · · · · · · · · · · · · · ·	
3 Excess distributions carryover, if any, to 2018:				
a From 2013				
b From 2014				
c From 2015				
d From 2016				
e From 2017				- · · · · · · · · · · · · · · · · · · ·
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2018 from				
Part XII, line 4: ► \$ 867,307.			0.	
a Applied to 2017, but not more than line 2a			υ.	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)				
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	0.	···		56,401.
d Applied to 2018 distributable amount	810,906.			30,401.
e Remaining amount distributed out of corpus	0.00.	····· <u>-</u>		0.
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	810,906.			
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		0.		
assessed		0.		
d Subtract line 6c from line 6b Taxable		0.		
amount - see instructions e Undistributed income for 2017 Subtract line				
4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2018 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2019				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2013				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2019				
Subtract lines 7 and 8 from line 6a	810,906.			
0 Analysis of line 9				
a Excess from 2014				
b Excess from 2015				
c Excess from 2016				
d Excess from 2017				
e Excess from 2018 810,906.		·		

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	M FOUNDATIO			82-44	34/52 Page 10
Part XIV Private Operating Fo	undations (see in	structions and Part V	I-A, question 9)	N/A	
1 a If the foundation has received a ruling or	determination letter tha	t it is a private operating			
foundation, and the ruling is effective for	2018, enter the date of	the ruling	▶ ∟		
b Check box to indicate whether the found	ation is a private operati	ng foundation described		4942(J)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
investment return from Part X for	<u> </u>	<u> </u>			
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
· · · · · · · · · · · · · · · · · · ·		 	-		_
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities			 		
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon.					
a "Assets" alternative test - enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(i)(3)(B)(i)					
b "Endowment" alternative test - enter				<u> </u>	
2/3 of minimum investment return shown in Part X, line 6 for each year					
listed	/_		 		
c "Support" alternative test - enter					
(1) Total support other than gross					
investment income (interest, dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income		· -			
Part XV Supplementary Infor	mation (Comple	te this part only	if the foundation	nad \$5,000 or mor	e in assets
at any time during th					
1 Information Regarding Foundation	Managers:		·		
a List any managers of the foundation who	have contributed more	than 2% of the total conf	ilbutions received by the	foundation before the closi	e of any tax
year (but only if they have contributed me					
SEE STATEMENT 7					
b List any managers of the foundation who			(or an equally large portio	n of the ownership of a pa	rtnership or
other entity) of which the foundation has	a 10% or greater interes	st			
NONE					
2 Information Regarding Contribution					
Check here 🕨 🗓 if the foundation on					ests for funds If
the foundation makes gifts, grants, etc., t					
a The name, address, and telephone number	er or email address of th	ne person to whom applic	cations should be address	ed.	
b The form in which applications should be	submitted and informa	tion and materials they s	hould include		
c Any submission deadlines					
d Any restrictions or limitations on awards,	such as hy neographic	al areas, charitable fields	kinds of institutions, or c	ther factors	-
a ziny restrictions of minications on awards,	Section by geographical	a. a. cac, charnable nelts,	, or montonono, or c		

3 Grants and Contributions Paid During the		Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
SUMMIT ACADEMY OIC	N/A	PC	PROVIDE EDUCATION FOR	
935 OLSON MEMORIAL HIGHWAY			UNDER-EDUCATED	
MINNEAPOLIS, MN 55405			INDIVIDUALS	.320,000
	7/2		CENTERAL OPERATING	
CATHOLIC CHARITIES OF ST. PAUL AND	N/A	PC	GENERAL OPERATING	
MINNEAPOLIS 1200 SECOND AVE S				
MINNEAPOLIS, MN 55403				50,000
TWIN CITIES HABITAT FOR HUMANITY	N/A	PC	GENERAL OPERATING	
1954 UNIVERSITY AVE W ST. PAUL MN 55104				50,000
51. 1A05, IN 55104				
THE ARC MINNESOTA	N/A	PC	GENERAL OPERATING	
2446 UNIVERSITY AVE W, STE 110				
ST. PAUL, MN 55114				50,000
THE RETREAT	N/A	PC	GENERAL OPERATING	
1221 WAYZATA BLVD E				
WAYZATA, MN 55391				300,000
	ONTINUATION SHEE	T(S)	<u>▶ 3a</u>	820,000
b Approved for future payment				
NONE				
				
<u> </u>				
Total			► 3b	0

Part YVI_A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelat	ed business income		d by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
•	Code				
a b					
c					
d					
e	[
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			14	3,033.	
5 Net rental income or (loss) from real estate:					*
a Debt-financed property					-
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property				į	
7 Other investment income					
8 Gain or (loss) from sales of assets other					==-··
than inventory					
9 Net income or (loss) from special events				-	
O Gross profit or (loss) from sales of inventory					
1 Other revenue					
a					
b		-			
C					
d					
e					
2 Subtotal Add columns (b), (d), and (e)		0		3,033.	0.
13 Total Add line 12, columns (b), (d), and (e)				13	3,033.
See worksheet in line 13 instructions to verify calculations)				
Part XVI-B Relationship of Activities	to the Acco	mplishment of Ex	xempt P	urposes	
Line No Explain below how each activity for which in the foundation's exempt purposes (other the	ncome is reported an by providing fui	in column (e) of Part XVI nds for such purposes)	-A contribut	led importantly to the accomp	lishment of
					····
					
					 -
				 	····································
		· -· - -			
					
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		-			
	<u> </u>				
			 		
					
		<u></u>			

Form **990-PF** (2018)

	Exempt Organ	nizations						
1	Did the organization directly or ind	rectly engage in any of the following with any other organization	on described in section 501(c)		Yes	No		
	(other than section 501(c)(3) organ	nizations) or in section 527, relating to political organizations?			1011104 17	,,,,		
a	ransfers from the reporting foundation to a noncharitable exempt organization of							
	(1) Cash			1a(1)		Х		
	(2) Other assets			1a(2)		Х		
b	Other transactions:							
	(1) Sales of assets to a noncharita	able exempt organization		1b(1)		X		
	(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			1b(5)		Х		
	(6) Performance of services or me	embership or fundraising solicitations		1b(6)		Х		
U	Sharing of facilities, equipment, ma	ailing lists, other assets, or paid employees		16		X		
ď	If the answer to any of the above is	s "Yes," complete the following schedule Column (b) should alv	ways show the fair market value of the goods, of	her ass	ets,			
	or services given by the reporting f	foundation. If the foundation received less than fair market valu	o in any transaction or sharing arrangement, sho	nı wc				
	column (d) the value of the goods,	other assets, or services received						
a)L	ine no (b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sh	aring arra	angemen	its		
		N/A			_			

						•••••		
						•		

Ī			**************************************
2a Isthe	foundation directly or indirect	tly affiliated with, or related to, one or more tax-exempt organizal	tions described

2a	Is the foundation directly or indirectly affiliated with, or related to, on				
	in section 501(c) (other than section 501(c)(3)) or in section 527?				X No
b	If "Yes," complete the following schedule				
	(a) Name of organization	(b) Type of organization	(c) Description of	f relationship	
	N/A				

Sign Here	Under penalties of perjury I declare that I have examined this and belief, it is true, correct, and complete Declaration of pre			s any knowledge	May the IRS discuss this return with the preparer shown below? See instr X Yes No
Paid Prepa	Print/Type preparer's name LAWRENCE H. MOHR, CPA	Preparer's signature	7/26/19	self- employed	PTIN P00447603 -0859910
Use C		Phone no 612.876.4500			

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545 0047

2018

Employer identification number Name of the organization 82-4434752 DOMINIUM FOUNDATION Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule TX 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 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I (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, 990-EZ, or 990 PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990 EZ or on its Form 990 PF, Part I, line 2, to

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

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990 EZ, or 990-PF)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

Employer identification number

DOMINIUM FOUNDATION

82-4434752

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	PAUL SWEEN 16411 RINGER RD WAYZATA, MN 55391	\$	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
2	ARMAND BRACHMAN 6924 JUBERT LN CORCORAN, MN 55340	\$\$	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
3	MARK MOORHOUSE 505 WILLOW DR S ORONO, MN 55356-9373	\$ 48,230.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	JACK AND PAMELA SAFAR 630 INDIAN MOUND ST WAYZATA, MN 55391	\$661,419.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	DOMINIUM PARTNERS CHARITABLE FUND, LLC 2905 NORTHWEST BLVD, SUITE 150 PLYMOUTH , MN 55441	\$ 1,147,346.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	DAVID BRIERTON QTIP MRTL TR 333 WASHINGTON AVE N, STE 202 MINNEAPOLIS, MN 55401	\$9,318.	Person X Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

DOMINIUM FOUNDATION

82-4434752

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	DAVID L AND JUDITH A BRIERTON IRREVOCABLE FAMILY TRUST 333 WASHINGTON AVE N, STE 202 MINNEAPOLIS, MN 55401	\$30,061.	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			
		\$	Person Payroll Oncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Oncash Occash Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Oncash Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Oncash Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)			

Name of organization

Employer identification number

DOMINIUM FOUNDATION

82-4434752

	OM FOUNDATION		-4434/52
art II	Noncash Property (see instructions) Use duplicate copies of P	art 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
		s	
(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
_		\$	8
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_			
- 1			

Name of org	ganization		· · · · · · · · · · · · · · · · · · ·	Employer identification number			
DOMINI	UM FOUNDATION			82-4434752			
Part III	Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a) the completing Part III, enter the total of exclusively religious, charused duplicate copies of Part III if additional sp	nrough (e) and the following line en aritable, etc., contributions of \$1,000 or	try. For organizations	hat total more than \$1,000 for the year			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held			
		(e) Transfer of gif	+				
	Transferee's name, address, and			nsferor to transferee			
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held			
Part I							
		(e) Transfer of gıf					
	Transferee's name, address, and		nsferor to transferee				
(a) No.							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held			
		(e) Transfer of gif					
	Transferee's name, address, and	Relationship of tra	nsferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held			
-	(e) Transfer of gift						
	Transferee's name, address, and	ZIP + 4	Relationship of trai	nsferor to transferee			

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager or substantial contributor Name and address (home or business) recipient PC PROVIDE AFFORDABLE COMMONBOND COMMUNITIES N/A HOUSING TO PEOPLE IN 1080 MONTREAL AVE 50,000. ST. PAUL, MN 55116 50,000. Total from continuation sheets

FORM 990-PF DIVIDEN		AND INTER	EST	FROM SECUR	ITIES S	TATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	
TAX-EXEMPT INTEREST DOMINIUM TEBS PARENT I, LLC TAX-EXEMPT INTEREST DOMINIUM	2,283.		0.	2,283.	0.	
TEBS PARENT II, LLC	750.		0.	750.	0.	
TO PART I, LINE 4	3,033.		0.	3,033.	0.	
FORM 990-PF		LEGAL	FE	 ES		TATEMENT 2
			.			
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) F INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OTHER PROFESSIONAL		40,313.		0.		40,313.
TO FM 990-PF, PG 1, LN 16A		40,313.			40,313.	
FORM 990-PF	ОТ	HER PROFES	SIO	NAL FEES	S	ratement 3
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) F INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OTHER PROFESSIONAL		5,845.		0.		5,845.
TO FORM 990-PF, PG 1	., LN 16C	5,845.		0.		5,845.
FORM 990-PF		OTHER E	XDE!	JSES	gr	TATEMENT 4
			XI UI			
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) TINVEST- NTINCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
MISCELLANEOUS	_	1,149.		0.		1,149.
TO FORM 990-PF, PG 1	, LN 23	1,149.		0.		1,149.
	=					

FORM 990-PF	OTHER INVESTMENTS		STATEMENT 5
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
DOMINIUM TEBS PARENT I, LLC DOMINIUM TEBS PARENT II, LLC	FMV FMV	50,250. 50,250.	50,250. 50,250.
TOTAL TO FORM 990-PF, PART II,	LINE 13	100,500.	100,500.

FORM 990-PF PART VIII TRUSTE	- LIST	OF OFFICERS, I	DIRECTORS AGERS	STAT	EMENT 6
NAME AND ADDRESS		TITLE AND AVRG HRS/WK			EXPENSE
PAUL R. SWEEN 2905 NORTHWEST BOULEVARD, ST PLYMOUTH, MN 55441		CO-CHAIR 0.25	0.	0.	0.
PAMELA SAFAR 2905 NORTHWEST BOULEVARD, ST PLYMOUTH, MN 55441		CO-CHAIR 0.25	0.	0.	0.
TIMOTHY ALLEN 2905 NORTHWEST BOULEVARD, ST PLYMOUTH, MN 55441			0.	0.	0.
ANGELA CICH 2905 NORTHWEST BOULEVARD, ST PLYMOUTH, MN 55441	re 150	SECRETARY 0.50	0.	0.	0.
ARMAND E. BRACHMAN 2905 NORTHWEST BOULEVARD, ST PLYMOUTH, MN 55441		DIRECTOR 0.00	0.	0.	0.
MARK S. MOORHOUSE 2905 NORTHWEST BOULEVARD, ST PLYMOUTH, MN 55441		DIRECTOR 0.00	0.	0.	0.
KRISTIN DENNEWILL 2905 NORTHWEST BOULEVARD, ST PLYMOUTH, MN 55441	TE 150	DIRECTOR 0.00	0.	0.	0.
JOHN SIPES 2905 NORTHWEST BOULEVARD, ST PLYMOUTH, MN 55441	гЕ 150	DIRECTOR 0.00	0.	0.	0.
CHRISTOPHER P. BARNES 2905 NORTHWEST BOULEVARD, ST PLYMOUTH, MN 55441		DIRECTOR 0.00	0.	0.	0.
JEFFREY R. HUGGETT 2905 NORTHWEST BOULEVARD, ST PLYMOUTH, MN 55441	ГЕ 150	DIRECTOR 0.00	0.	0.	0.

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DOMINIUM FOUNDATION			82	-4434752
RACHEL KOLAR 2905 NORTHWEST BOULEVARD, STE 150 PLYMOUTH, MN 55441	DIRECTOR 1.00	0.	0.	0.
PAUL B. TELANDER 2905 NORTHWEST BOULEVARD, STE 150 PLYMOUTH, MN 55441	DIRECTOR 0.25	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	0.	0.	0.

FORM 990-PF PART XV - LINE 1A STATEMENT 7
LIST OF FOUNDATION MANAGERS

NAME OF MANAGER

PAUL R. SWEEN
PAMELA SAFAR
ARMAND E. BRACHMAN
MARK S. MOORHOUSE