

Form **990-PF**

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

OMB No. 1545-0047

2022

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.

Open to Public Inspection

For calendar year 2022 or tax year beginning , and ending

Name of foundation: **PRAIRIECARE FUND**

Number and street (or P.O. box number if mail is not delivered to street address): **5500 94TH AVE. N., #1227**

Room/suite: _____

City or town, state or province, country, and ZIP or foreign postal code: **BROOKLYN PARK MN 55443**

A Employer identification number: **81-1529812**

B Telephone number (see instructions): **763-762-8881**

C If exemption application is pending, check here

D 1. Foreign organizations, check here
2. Foreign organizations meeting the 85% test, check here and attach computation

E If private foundation status was terminated under section 507(b)(1)(A), check here

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here

G Check all that apply: Initial return Initial return of a former public charity
 Final return Amended return
 Address change Name change

H Check type of organization: Section 501(c)(3) exempt private foundation
 Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ **481,232**

J Accounting method: Cash Accrual
 Other (specify) _____
(Part I, column (d), must be on cash basis.)

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)	334,924			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	154	154	154	
	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				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)		0		
	8 Net short-term capital gain			0	
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule) STMT 1	127,973		127,973		
12 Total. Add lines 1 through 11	463,051	154	128,127		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	0			
	14 Other employee salaries and wages	89,325		89,325	
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule) SEE STMT 2	450		450	
	b Accounting fees (attach schedule) STMT 3	2,610		2,610	
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)				
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings	2,422		2,422	
	22 Printing and publications	595		595	
	23 Other expenses (att. sch.) STMT 4	121,997		121,997	
	24 Total operating and administrative expenses. Add lines 13 through 23	217,399	0	217,399	0
25 Contributions, gifts, grants paid	343,364			343,364	
26 Total expenses and disbursements. Add lines 24 and 25	560,763	0	217,399	343,364	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	-97,712				
b Net investment income (if negative, enter -0-)		154			
c Adjusted net income (if negative, enter -0-)			0		

For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2022)

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	181,221	98,260	98,260
	2 Savings and temporary cash investments	271,152	271,306	271,306
	3 Accounts receivable			
	Less: allowance for doubtful accounts			
	4 Pledges receivable			
	Less: allowance for doubtful accounts			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (att. schedule)			
	Less: allowance for doubtful accounts	0		
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	26,753	54,223	54,223
	10a Investments – U.S. and state government obligations (attach schedule)			
	b Investments – corporate stock (attach schedule)			
	c Investments – corporate bonds (attach schedule)			
	11 Investments – land, buildings, and equipment: basis			
Less: accumulated depreciation (attach sch.)				
12 Investments – mortgage loans				
13 Investments – other (attach schedule)				
14 Land, buildings, and equipment: basis				
Less: accumulated depreciation (attach sch.)				
15 Other assets (describe SEE STATEMENT 5)		57,443	57,443	
16 Total assets (to be completed by all filers – see the instructions. Also, see page 1, item I)	479,126	481,232	481,232	
Liabilities	17 Accounts payable and accrued expenses		6,667	
	18 Grants payable	4,625	45,840	
	19 Deferred revenue (SEE STATEMENT 6)	41,440	33,500	
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe SEE STATEMENT 7)		59,876	
	23 Total liabilities (add lines 17 through 22)	46,065	145,883	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30. <input checked="" type="checkbox"/>			
	24 Net assets without donor restrictions	433,061	335,349	
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30. <input type="checkbox"/>			
	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)	433,061	335,349		
30 Total liabilities and net assets/fund balances (see instructions)	479,126	481,232		

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	433,061
2 Enter amount from Part I, line 27a	2	-97,712
3 Other increases not included in line 2 (itemize)	3	
4 Add lines 1, 2, and 3	4	335,349
5 Decreases not included in line 2 (itemize)	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 29	6	335,349

Part IV Capital Gains and Losses for Tax on Investment Income

Table with columns for (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) FMV as of 12/31/69, (j) Adjusted basis, (k) Excess of col. (i) over col. (j), (l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h)).

Summary rows for Capital gain net income or (net capital loss) and Net short-term capital gain or (loss) as defined in sections 1222(5) and (6).

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

Table for Excise Tax with rows 1a through 11, including columns for tax amounts and sub-rows 6a through 6d for credits/payments.

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?		X
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.		X
c Did the foundation file Form 1120-POL for this year?		X
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.		X
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		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year? N/A		
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> .		X
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?	X	
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	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. MN		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2022 or the tax year beginning in 2022? See instructions for Part XIII. If "Yes," complete Part XIII		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X
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		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		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address WWW.PRAIRIECAREFUND.ORG	X	
14 The books are in care of RHODA BEAIRD Telephone no. 763-762-8881 5500 94TH AVENUE #1227 Located at BROOKLYN PARK MN ZIP+4 55443		
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 2022, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country		X

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?		X
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	1a(1)	X
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(2)	X
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(3)	X
(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(4)	X
(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(5)	X
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	N/A	1b
c Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>		
d Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2022?	N/A	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 2022, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2022? If "Yes," list the years 20 , 20 , 20 , 20	2a	X
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.)	N/A	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	X
b If "Yes," did it have excess business holdings in 2022 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2022.)	N/A	3b
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2022?	4b	X

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))?		X
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?		X
(3) Provide a grant to an individual for travel, study, or other similar purposes?		X
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d) (4)(A)? See instructions		X
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?		X
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	N/A	
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).	N/A	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.		X
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?		X
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	N/A	
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?		X

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
SEE STATEMENT 8				

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

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

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

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

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

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services

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 N/A	
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 N/A	
2	
All other program-related investments. See Instructions.	
3	

Total. Add lines 1 through 3

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	0
b	Average of monthly cash balances	1b	404,685
c	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	404,685
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	404,685
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)	4	6,070
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	398,615
6	Minimum investment return. Enter 5% (0.05) of line 5	6	19,931

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	19,931
2a	Tax on investment income for 2022 from Part V, line 5	2a	2
b	Income tax for 2022. (This does not include the tax from Part V.)	2b	
c	Add lines 2a and 2b	2c	2
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	19,929
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	19,929
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	19,929

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	343,364
b	Program-related investments – total from Part VIII-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4	4	343,364

Part XII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2021	(c) 2021	(d) 2022
1 Distributable amount for 2022 from Part X, line 7				19,929
2 Undistributed income, if any, as of the end of 2022:				
a Enter amount for 2021 only				
b Total for prior years: 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2022:				
a From 2017	110,150			
b From 2018	129,004			
c From 2019	183,380			
d From 2020	207,057			
e From 2021	121,615			
f Total of lines 3a through e	751,206			
4 Qualifying distributions for 2022 from Part XI, line 4: \$ 343,364				
a Applied to 2021, but not more than line 2a				
b Applied to undistributed income of prior years (Election required – see instructions)				
c Treated as distributions out of corpus (Election required – see instructions)				
d Applied to 2022 distributable amount				19,929
e Remaining amount distributed out of corpus	323,435			
5 Excess distributions carryover applied to 2022 (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	1,074,641			
b Prior years' undistributed income. Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable amount – see instructions				
e Undistributed income for 2021. Subtract line 4a from line 2a. Taxable amount – see instructions				
f Undistributed income for 2022. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2023				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)				
8 Excess distributions carryover from 2017 not applied on line 5 or line 7 (see instructions)	110,150			
9 Excess distributions carryover to 2023. Subtract lines 7 and 8 from line 6a	964,491			
10 Analysis of line 9:				
a Excess from 2018	129,004			
b Excess from 2019	183,380			
c Excess from 2020	207,057			
d Excess from 2021	121,615			
e Excess from 2022	323,435			

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 2022, 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) 2022	(b) 2021	(c) 2020	(d) 2019	
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).)

N/A

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.

N/A

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:

SEE STATEMENT 9

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

CONTACT FUND FOR MORE INFORMATION.

c Any submission deadlines:

THERE IS NO DEADLINE.

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

SEE STATEMENT 10

Part XIV Supplementary Information (continued)

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> BROOKLYN CENTER COMMUNITY SCHOOL 6300 SHINGLE CREEK PKWY BROOKLYN CENTER MN 55430		PAID	VARIOUS	12,900
PRODEO ACADEMY 4141 UNIVERSITY AVE NE COLUMBIA HEIGHTS MN 55421		PAID	VARIOUS	35,000
INDEPENDENT SCHOOL DIST. 196 3455 153RD ST W ROSEMOUNT MN 55068		PAID	MENTAL HEALTH GRANT	40,000
LAURA JEFFREY ACADEMY 1550 SUMMIT AVE ST. PAUL MN 55105		PAID	MENTAL HEALTH GRANT	19,730
ROBBINSDALE AREA SCHOOLS 4148 WINNETKA AVE N NEW HOPE MN 55427		PAID	VARIOUS	46,500
SIBLEY EAST ELEMENTARY 625 HARVEY DR GAYLORD MN 55334		PAID	VARIOUS	18,409
GLACIAL HILLS ELEMENTARY 3825 GLACIER DR EAGAN MN 55123		PAID	VARIOUS	6,400
NORTHERN LIGHTS COMMUNITY SCHOOLS 305 BRIDGE ST WARBA MN 55793		PAID	VARIOUS	5,000
LAKES COUNTRY ACADEMY 524 WILLOW DRIVE ALEXANDRIA MN 56308		PAID	MENTAL HEALTH GRANT	5,000
JONATHAN ELEMENTARY 110300 PIONEER TRAIL CHASKA MN 55318		PAID	VARIOUS	22,400
Total			3a	343,364
b <i>Approved for future payment</i> N/A				
Total			3b	

Part XIV Supplementary Information (continued)

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

Recipient Name and address (home or business)	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
a Paid during the year CORNERSTONE MONTESSORI ELEMENTARY 1611 AMES AVE E ST. PAUL MN 55106		PAID	MENTAL HEALTH GRANT	6,605
SPRING LAKE PARK DISTRICT 1415 81ST AVE NE MINNEAPOLIS MN 55432		PAID	MENTAL HEALTH GRANT	75,000
WHITE BEAR LAKE AREA SCHOOLS 4855 BLOOM AVE WHITE BEAR LAKE MN 55110		PAID	PEER TO PEER MENTORING PROGRAM	15,000
RED LAKE SCHOOLS 23990 HWY 1 RED LAKE MN 56671		PAID	WELLNESS NIGHTS AND TRAINING	21,300
KIPP MINNESOTA 5034 N OLIVER AVE MINNEAPOLIS MN 55430		PAID	VARIOUS	6,000
SOUTH WASHINGTON COUNTY SCHOOLS 7362 E POINT DOUGLAS RD S COTTAGE GROVE MN 55016		PAID	GRANT	900
BROWNS VALLEY SCHOOL DISTRICT P.O. BOX N, 118 CHURCH ST BROWNS VALLEY MN 56219		PAID	VARIOUS	7,220
Total				3a
b Approved for future payment N/A				
Total				3b

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Statement 1 - Form 990-PF, Part I, Line 11 - Other Income

Description	Revenue per Books	Net Investment Income	Adjusted Net Income
GOLF FUNDRAISER	\$ 10,978	\$	\$ 10,978
2022 GALA	116,995		116,995
TOTAL	<u>\$ 127,973</u>	<u>\$ 0</u>	<u>\$ 127,973</u>

Statement 2 - Form 990-PF, Part I, Line 16a - Legal Fees

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
INDIRECT LEGAL FEES	\$ 450	\$	\$ 450	\$
TOTAL	<u>\$ 450</u>	<u>\$ 0</u>	<u>\$ 450</u>	<u>\$ 0</u>

Statement 3 - Form 990-PF, Part I, Line 16b - Accounting Fees

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
INDIRECT ACCOUNTING FEES	\$ 2,610	\$	\$ 2,610	\$
TOTAL	<u>\$ 2,610</u>	<u>\$ 0</u>	<u>\$ 2,610</u>	<u>\$ 0</u>

Statement 4 - Form 990-PF, Part I, Line 23 - Other Expenses

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
GOLF FUNDRAISER		\$	\$	\$
FEES	1,013		1,013	
EVENT EXPENSES	22,130		22,130	
TRAVEL AND MILAGE	206		206	
SUPPLIES	3,831		3,831	
ADVERTISING	222		222	

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Statement 4 - Form 990-PF, Part I, Line 23 - Other Expenses (continued)

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
	\$	\$	\$	\$
2022 GALA				
FEES	4,376		4,376	
EVENT EXPENSES	50,100		50,100	
SUPPLIES	8,097		8,097	
ADVERTISING	647		647	
EXPENSES				
MARKETING/PROMOTIONAL	10,762		10,762	
CREDIT CARD FEES	4,570		4,570	
DONOR RECOGNITION	4,346		4,346	
POSTAGE	628		628	
BUSINESS EXPENSES	26		26	
CONTRACTED SERVICES	4,564		4,564	
PARKING	22		22	
STAFF DEVELOPMENT	1,211		1,211	
SUPPLIES	715		715	
DUES AND SUBSCRIPTIONS	1,843		1,843	
INSURANCE	1,031		1,031	
MEETING EXPENSES	1,657		1,657	
TOTAL	<u>\$ 121,997</u>	<u>\$ 0</u>	<u>\$ 121,997</u>	<u>\$ 0</u>

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Statement 5 - Form 990-PF, Part II, Line 15 - Other Assets

Description	Beginning of Year	End of Year	Fair Market Value
MEMORIAL ACCOUNT	\$	\$ 57,443	\$ 57,443
TOTAL	\$ 0	\$ 57,443	\$ 57,443

Statement 6 - Form 990-PF, Part II, Line 19 - Deferred Revenue

Description	Beginning of Year	End of Year
DEFERRED GALA REVENUE	\$ 41,440	\$ 33,500
TOTAL	\$ 41,440	\$ 33,500

Statement 7 - Form 990-PF, Part II, Line 22 - Other Liabilities

Description	Beginning of Year	End of Year
CREDIT CARD PAYABLE	\$	\$ 201
MEMORIAL FUND		59,675
TOTAL	\$ 0	\$ 59,876

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Statement 8 - Form 990-PF, Part VII, Line 1 - List of Officers, Directors, Trustees, Etc.

<u>Name and Address</u>	<u>Title</u>	<u>Average Hours</u>	<u>Compensation</u>	<u>Benefits</u>	<u>Expenses</u>
ANN FRITZ 5500 94TH AVE N, #1227 BROOKLYN PARK MN 55443	PRESIDENT	0.00	0	0	0
HEIDI NORTHRUP 5500 94TH AVE. N. #1227 BROOKLYN PARK MN 55443	SECRETARY &	0.00	0	0	0
BRYAN AITKENS 5500 94TH AVE N #1227 BROOKLYN PARK MN 55443	BOARD MEMBER	0.00	0	0	0
RHODA BEAIRD 5500 94TH AVENUE #1227 BROOKLYN PARK MN 55443	BOARD MEMBER	0.00	0	0	0
QUINN HANDAHL 5500 94TH AVENUE N #1227 BROOKLYN PARK MN 55443	BOARD MEMBER	0.00	0	0	0
JOANNE HOFFMAN JECHA, MD 5500 94TH AVE N, #1227 BROOKLYN PARK MN 55443	BOARD MEMBER	0.00	0	0	0
ERICA LARSON 1295 BANDANA BLVD N #200 ST. PAUL MN 55108	BOARD MEMBER	0.00	0	0	0
TOM LEHMAN 5500 94TH AVE N, #1227 BROOKLYN PARK MN 55443	BOARD MEMBER	0.00	0	0	0
BRIAN MURRAY 5500 94TH AVE N, #1227 BROOKLYN PARK MN 55443	BOARD MEMBER	0.00	0	0	0
MAUREEN PRYOR	BOARD MEMEBE	0.00	0	0	0

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Statement 8 - Form 990-PF, Part VII, Line 1 - List of Officers, Directors, Trustees, Etc.
(continued)

<u>Name and Address</u>	<u>Title</u>	<u>Average Hours</u>	<u>Compensation</u>	<u>Benefits</u>	<u>Expenses</u>
5500 94TH AVE N. #1227 BOOKLYN PARK MN 55443					
MIKE STARK 5500 94TH AVE N. #1227 BROOKLYN PARK MN 55443	BOARD MEMBER	0.00	0	0	0
STEPHAN SETTERBERG, MD 9400 ZANE AVE BROOKLYN MN 55443	EX-OFFIC.	0.00	0	0	0
MARSHA SWAILS 4575 W 80TH ST. CIR. BLOOMINGTON MN 55437	PAST CHAIR,	0.00	0	0	0
TODD ARCHBOLD, LSW/MBA 9400 ZANE AVE BROOKLYN PARK MN 55443	PRAIRIECARE	0.00	0	0	0
RANDY DRAGER 9400 ZANE AVE BROOKLYN PARK MN 55443	PRAIRIECARE	0.00	0	0	0
JOHN RYAN 9400 ZANE AVE BROOKLYN PARK MN 55443	PRAIRIECARE	0.00	0	0	0
NANCY BURTON 5500 94TH AVE N #1227 BROOKLYN PARK MN 55443	EXECUTIVE DI	0.00	0	0	0
KELLI LARSON 5500 94TH AVE N #1227 BROOKLYN PARK MN 55443	ADMIN. ASSIS	0.00	0	0	0

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Statement 8 - Form 990-PF, Part VII, Line 1 - List of Officers, Directors, Trustees, Etc.
(continued)

<u>Name and Address</u>	<u>Title</u>	<u>Average Hours</u>	<u>Compensation</u>	<u>Benefits</u>	<u>Expenses</u>
MICHAEL MOODY 5500 94TH AVE N #1227 BROOKLYN PARK MN 55443	MARKETING &	0.00	0	0	0

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Statement 9 - Form 990-PF, Part XIV, Line 2a - Name, Address and Email for Applications

Description

NANCY BURTON 763-762-8881
5500 94TH AVE. N. BROOKLYN PARK MN 55443
FUND@PRAIRIECAREFUND.ORG

Form 990-PF, Part XIV, Line 2b - Application Format and Required Contents

Description

CONTACT FUND FOR MORE INFORMATION.

Form 990-PF, Part XIV, Line 2c - Submission Deadlines

Description

THERE IS NO DEADLINE.

Statement 10 - Form 990-PF, Part XIV, Line 2d - Award Restrictions or Limitations

Description

AWARDS WILL BE LIMITED TO NEED AND FUNDS AVAILABLE BY
FOUNDATION AT DISCRETION OF THE BOARD.

Form **8879-TE**

IRS *c-file* Signature Authorization
for a Tax Exempt Entity

OMB No. 1545-0047

For calendar year 2022, or fiscal year beginning _____, 2022, and ending _____, 20 _____

Do not send to the IRS. Keep for your records.
Go to www.irs.gov/Form8879TE for the latest information.

2022

Department of the Treasury
Internal Revenue Service
Name of filer

EIN or SSN
81-1529812

Name and title of officer or person subject to tax
PRAIRIECARE FUND
HEIDI NORTHRUP
SECRETARY & TREASURE

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-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 for 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-). But, 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 <u>2</u>
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 and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that I am an officer of the above entity or I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the 2022 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. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an 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. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

I authorize **LETHERT, SKWIRA, SCHULTZ & CO. LLP** to enter my PIN **62200** as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax

Heidi Northrup

Date **11/10/23**

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

41402255101

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2022 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature **ANGIE M. AGREY, CPA**

Date **11/10/23**

ERO Must Retain This Form — See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So