

Exempt Organization Declaration and Signature for Electronic Filing

For calendar year 2020, or tax year beginning _____, 2020, and ending _____, 20
For use with Forms 990, 990-EZ, 990-PF, 990-T, 1120-POL, 4720, and 8868
▶ Go to www.irs.gov/Form8453EO for the latest information.

2020

Department of the Treasury
Internal Revenue Service

Name of exempt organization or person subject to tax SECURIAN FINANCIAL FOUNDATION	Taxpayer identification number 36-3608619
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Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the type of return being filed with Form 8453-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, or 7a 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, or 7b, 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.

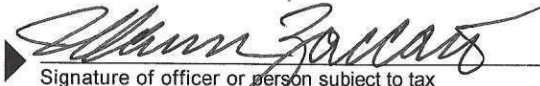
1a Form 990 check here ▶ <input type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12) . . . 1b _____	
2a Form 990-EZ check here ▶ <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9) 2b _____	
3a Form 1120-POL check here ▶ <input type="checkbox"/>	b Total 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 VI, line 5) . 4b <u>88,182.</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 _____	

Part II Declaration of Officer or Person Subject to Tax

6 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.


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 organization or I am the person subject to tax with respect to (name of organization) _____, (EIN) _____, and that I have examined a copy of the 2020 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		Date <u>05/13/2021</u>	Title, if applicable <u>TREASURER</u>
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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-EO 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 organization 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 ▶ 	Date	Check if also paid preparer <input type="checkbox"/>	Check if self-employed <input type="checkbox"/>	ERO's SSN or PTIN
	Firm's name (or yours if self-employed), address, and ZIP code ▶ _____	EIN _____ Phone no. _____			

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 <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶ _____	Firm's EIN ▶ _____			
	Firm's address ▶ _____	Phone no. _____			

Department of the Treasury
Internal Revenue Service

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.

2020

Open to Public Inspection

For calendar year **2020** or tax year beginning , **2020**, and ending , **20**

Name of foundation SECURIAN FINANCIAL FOUNDATION		A Employer identification number 36-3608619	
Number and street (or P.O. box number if mail is not delivered to street address)	Room/suite	B Telephone number (see instructions) (651) 665-3501	
City or town, state or province, country, and ZIP or foreign postal code SAINT PAUL, MN 55101-2015		C If exemption application is pending, check here. <input type="checkbox"/> D 1. Foreign organizations, check here. <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> E If private foundation status was terminated under section 507(b)(1)(A), check here. <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here. <input type="checkbox"/>	
G Check all that apply:	<input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change		<input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change
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			
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 67,749,210.	J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d), must be on cash basis.)		

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
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).)				
Revenue				
1 Contributions, gifts, grants, etc., received (attach schedule)	4,966,532.			
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B.				
3 Interest on savings and temporary cash investments	560.	559.		
4 Dividends and interest from securities	1,883,822.	1,883,822.		
5a Gross rents				
b Net rental income or (loss) _____				
6a Net gain or (loss) from sale of assets not on line 10	93,574.			
b Gross sales price for all assets on line 6a 35,253,337.				
7 Capital gain net income (from Part IV, line 2)		4,462,178.		
8 Net short-term capital gain.				
9 Income modifications				
10a Gross sales less returns and allowances				
b Less: Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)				
12 Total. Add lines 1 through 11	6,944,488.	6,346,559.		
Operating and Administrative Expenses				
13 Compensation of officers, directors, trustees, etc.	88,689.			88,689.
14 Other employee salaries and wages				
15 Pension plans, employee benefits	25,316.			25,316.
16a Legal fees (attach schedule)				
b Accounting fees (attach schedule)				
c Other professional fees (attach schedule)				
17 Interest				
18 Taxes (attach schedule) (see instructions).	59,028.			
19 Depreciation (attach schedule) and depletion				
20 Occupancy	6,297.			6,297.
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses (attach schedule) ATTCH 1.	92,850.	2,525.		90,325.
24 Total operating and administrative expenses. Add lines 13 through 23.	272,180.	2,525.		210,627.
25 Contributions, gifts, grants paid	3,637,488.			3,637,488.
26 Total expenses and disbursements. Add lines 24 and 25	3,909,668.	2,525.		3,848,115.
27 Subtract line 26 from line 12:				
a Excess of revenue over expenses and disbursements	3,034,820.			
b Net investment income (if negative, enter -0-)		6,344,034.		
c Adjusted net income (if negative, enter -0-)				

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	87,389.	48,017.	48,017.
	2	Savings and temporary cash investments	164,487.	31,428.	31,428.
	3	Accounts receivable ▶ <u>1,251.</u>			
		Less: allowance for doubtful accounts ▶ _____	305,272.	1,251.	1,251.
	4	Pledges receivable ▶ _____			
		Less: allowance for doubtful accounts ▶ _____			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶ _____			
		Less: allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments - U.S. and state government obligations (attach schedule) [2]	1,133,335.	829,204.	956,183.
	b	Investments - corporate stock (attach schedule) ATCH 3	57,082,324.	65,927,137.	65,927,137.
	c	Investments - corporate bonds (attach schedule) ATCH 4	826,170.	688,841.	760,672.
	11	Investments - land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
12	Investments - mortgage loans				
13	Investments - other (attach schedule)				
14	Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____				
15	Other assets (describe ▶ <u>ATCH 5</u>)	26,994.	24,522.	24,522.	
16	Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	59,625,971.	67,550,400.	67,749,210.	
Liabilities	17	Accounts payable and accrued expenses	45,401.	45,634.	
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons . .			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶ <u>ATCH 6</u>)	17,665.	17,665.	
23	Total liabilities (add lines 17 through 22)	63,066.	63,299.		
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input type="checkbox"/>				
	and complete lines 24, 25, 29, and 30.				
	24	Net assets without donor restrictions			
	25	Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/>				
	and complete lines 26 through 30.				
	26	Capital stock, trust principal, or current funds	57,839,874.	62,806,407.	
	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
28	Retained earnings, accumulated income, endowment, or other funds . .	1,723,030.	4,680,694.		
29	Total net assets or fund balances (see instructions)	59,562,904.	67,487,101.		
30	Total liabilities and net assets/fund balances (see instructions)	59,625,970.	67,550,400.		

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	59,562,904.
2	Enter amount from Part I, line 27a	2	3,034,820.
3	Other increases not included in line 2 (itemize) ▶ <u>ATCH 7</u>	3	4,889,377.
4	Add lines 1, 2, and 3	4	67,487,101.
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	67,487,101.

Part IV Capital Gains and Losses for Tax on Investment Income

Table with columns (a) through (l) for capital gains and losses. Includes rows for 'SEE PART IV SCHEDULE' and 'Capital gain net income or (net capital loss)'.

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

SECTION 4940(e) REPEALED ON DECEMBER 20, 2019 - DO NOT COMPLETE.

Table with columns (a) through (d) for qualification under Section 4940(e). All entries are 'Reserved'.

Part VI 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)			
b Reserved		1	88,182.
c All other domestic foundations enter 1.39% of line 27b. Exempt foreign organizations, enter 4% 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	88,182.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	88,182.
6 Credits/Payments:			
a 2020 estimated tax payments and 2019 overpayment credited to 2020.	6a		55,000.
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	55,000.
8 Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached		8	25.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9	33,207.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10	
11 Enter the amount of line 10 to be: Credited to 2021 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>		11	

Part VII-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. <input type="checkbox"/> \$ _____ (2) On foundation managers. <input type="checkbox"/> \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="checkbox"/> \$ _____		
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?		
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 XV	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. <input type="checkbox"/> 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 2020 or the tax year beginning in 2020? See the instructions for Part XIV. If "Yes," complete Part XIV.		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-16 containing questions about controlled entities, distributions, public inspection requirements, books in care, and foreign country interests.

Part 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.

Table with 3 columns: Question, Yes, No. Rows 1a-4b containing questions about disqualifying acts, taxes on failure to distribute income, and business enterprise interests.

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

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

Part VIII 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
ATCH 8		88,689.	0.	0.

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

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

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

Part VIII 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 IX-A Summary of Direct Charitable Activities

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

1	Expenses
N/A	

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

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

1	Amount
NONE	
All other program-related investments. See instructions.	
3	
NONE	

Total. Add lines 1 through 3 ▶

Part X 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	60,274,576.
b	Average of monthly cash balances	1b	93,767.
c	Fair market value of all other assets (see instructions).	1c	
d	Total (add lines 1a, b, and c)	1d	60,368,343.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d.	3	60,368,343.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	905,525.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	59,462,818.
6	Minimum investment return. Enter 5% of line 5	6	2,973,141.

Part XI 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 X, line 6	1	2,973,141.
2a	Tax on investment income for 2020 from Part VI, line 5	2a	88,182.
b	Income tax for 2020. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b.	2c	88,182.
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	2,884,959.
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4	5	2,884,959.
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	2,884,959.

Part 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	3,848,115.
b	Program-related investments - total from Part IX-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 V, line 8; and Part XIII, line 4	4	3,848,115.
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. See instructions.	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,848,115.

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 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2019	(c) 2019	(d) 2020
1 Distributable amount for 2020 from Part XI, line 7				2,884,959.
2 Undistributed income, if any, as of the end of 2020:				
a Enter amount for 2019 only.				
b Total for prior years: 20 18 , 20 17 , 20 16				
3 Excess distributions carryover, if any, to 2020:				
a From 2015				
b From 2016				
c From 2017		520,815.		
d From 2018		630,895.		
e From 2019				
f Total of lines 3a through e	1,151,710.			
4 Qualifying distributions for 2020 from Part XII, line 4: ▶ \$ 3,848,115.				
a Applied to 2019, 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 2020 distributable amount.				2,884,959.
e Remaining amount distributed out of corpus.	963,156.			
5 Excess distributions carryover applied to 2020 (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	2,114,866.			
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 2019. Subtract line 4a from line 2a. Taxable amount - see instructions				
f Undistributed income for 2020. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2021.				
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 2015 not applied on line 5 or line 7 (see instructions)				
9 Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a	2,114,866.			
10 Analysis of line 9:				
a Excess from 2016				
b Excess from 2017		520,815.		
c Excess from 2018		630,895.		
d Excess from 2019				
e Excess from 2020		963,156.		

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) NOT APPLICABLE

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2020, 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)

Table with 5 columns: Tax year (a) 2020, (b) 2019, (c) 2018, (d) 2017, (e) Total. Rows include 2a (net income), 2b (85% of line 2a), 2c (qualifying distributions), 2d (amounts included), 2e (qualifying distributions), 3 (alternative tests), and 4 (gross investment income).

Part XV 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).)

NONE

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.

NONE

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:

ATCH 9

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

c Any submission deadlines:

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

Part XV 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
<p>a <i>Paid during the year</i> SEE ATTACHED 400 ROBERT STREET NORTH ST. PAUL, MN 55101</p>			SEE ATTACHED	3,637,488.
Total				3a 3,637,488.
<p>b <i>Approved for future payment</i></p>				
Total				3b

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

- 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?
a Transfers from the reporting foundation to a noncharitable exempt organization of:
(1) Cash
(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.

Table with 4 columns: (a) Line no., (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements. Row 1 contains 'N/A' in columns (b) and (d).

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.

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship.

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

Sign Here

Signature of officer or trustee: [Signature] Date: 05/13/2021 Title: TREASURER

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

Paid Preparer Use Only section containing fields for Print/Type preparer's name, Preparer's signature, Date, Check self-employed, PTIN, Firm's name, Firm's address, Firm's EIN, and Phone no.

**FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME**

Kind of Property		Description				P or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj. basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
35253337.		PUBLICALLY TRADED SECURITIES PROPERTY TYPE: SECURITIES 30791159.				D	4,462,178.	
TOTAL GAIN(LOSS)							<u>4,462,178.</u>	

Schedule of Contributors

2020

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

Name of the organization SECURIAN FINANCIAL FOUNDATION	Employer identification number 36-3608619
---	--

Organization type (check one):

Filers of:

Section:

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

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

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

General Rule

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or 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 certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization **SECURIAN FINANCIAL FOUNDATION**

Employer identification number
36-3608619

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	SECURIAN HOLDING COMPANY 400 ROBERT STREET NORTH SAINT PAUL, MN 55101	\$ 1,966,603.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
2	MINNESOTA LIFE INSURANCE COMPANY 400 ROBERT STREET NORTH SAINT PAUL, MN 55101	\$ 2,999,929.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" 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 **SECURIAN FINANCIAL FOUNDATION**

Employer identification number

36-3608619

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	MASTERCARD INC STOCK 2709 SHARES	\$ 933,115.	02/21/2020
1	AMAZON.COM INC STOCK 480 SHARES	\$ 1,033,488.	02/21/2020
2	AMAZON.COM INC STOCK 23 SHARES	\$ 72,193.	08/05/2020
2	ADOBE INC STOCK 4638 SHARES	\$ 2,072,815.	08/05/2020
2	VISA INC STOCK 4446 SHARES	\$ 854,921.	08/05/2020
		\$	

Name of organization **SECURIAN FINANCIAL FOUNDATION**

Employer identification number
36-3608619

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
_____ _____ _____	_____ _____ _____

ATTACHMENT 1FORM 990PF, PART I - OTHER EXPENSES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>	<u>CHARITABLE PURPOSES</u>
BANK CHARGES	2,525.	2,525.	
MISC EXPENSES	49,559.		49,559.
CYBERGRANT	40,766.		40,766.
TOTALS	<u>92,850.</u>	<u>2,525.</u>	<u>90,325.</u>

FORM 990PF, PART II - U.S. AND STATE OBLIGATIONSATTACHMENT 2

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>	<u>ENDING FMV</u>
US GOVERNMENT BONDS	829,204.	956,183.
US OBLIGATIONS TOTAL	<u>829,204.</u>	<u>956,183.</u>

ATTACHMENT 3FORM 990PF, PART II - CORPORATE STOCK

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>	<u>ENDING FMV</u>
COMMON STOCK - UNAFFILIATED	65,927,137.	65,927,137.
TOTALS	<u>65,927,137.</u>	<u>65,927,137.</u>

ATTACHMENT 4FORM 990PF, PART II - CORPORATE BONDS

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>	<u>ENDING FMV</u>
OTHER UNAFFILIATED BONDS	688,841.	760,672.
TOTALS	<u>688,841.</u>	<u>760,672.</u>

ATTACHMENT 5FORM 990PF, PART II - OTHER ASSETS

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>	<u>ENDING FMV</u>
ACCRUED INVESTMENT INCOME	24,522.	24,522.
TOTALS	<u>24,522.</u>	<u>24,522.</u>

ATTACHMENT 6

FORM 990PF, PART II - OTHER LIABILITIES

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>
SECURITIES PAYABLE	
OTHER LIABILITIES	17,665.
TOTALS	<u>17,665.</u>

ATTACHMENT 7

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

<u>DESCRIPTION</u>	<u>AMOUNT</u>
COMMON STOCK MARKET ADJUSTMENT	4,889,377.
TOTAL	<u>4,889,377.</u>

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEESATTACHMENT 8

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION</u>	<u>COMPENSATION</u>	<u>CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS</u>	<u>EXPENSE ACCT AND OTHER ALLOWANCES</u>
CHRIS HILGER 400 ROBERT STREET NORTH SAINT PAUL, MN 55101-2015	PRESIDENT	0.		
KRISTI NELSON 400 ROBERT STREET NORTH SAINT PAUL, MN 55101-2015	VICE PRESIDENT	0.		
GARY CHRISTENSEN 400 ROBERT STREET NORTH SAINT PAUL, MN 55101-2015	DIRECTOR	0.		
KRISTI FOX 400 ROBERT STREET NORTH SAINT PAUL, MN 55101-2015	DIRECTOR	0.		
WARREN ZACCARO 400 ROBERT STREET NORTH SAINT PAUL, MN 55101-2015	TREASURER	0.		
JAMES FULLER 400 ROBERT STREET NORTH SAINT PAUL, MN 55101-2015	SECRETARY	0.		

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEESATTACHMENT 8 (CONT'D)

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION</u>	<u>COMPENSATION</u>	<u>CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS</u>	<u>EXPENSE ACCT AND OTHER ALLOWANCES</u>
NICOLE HANSEN 400 ROBERT STREET NORTH SAINT PAUL, MN 55101-2015	MANAGER 40.00	88,689.		
ROBERT EHREN 400 ROBERT STREET NORTH SAINT PAUL, MN 55101-2015	DIRECTOR	0.		
	GRAND TOTALS	<u>88,689.</u>	<u>0.</u>	<u>0.</u>

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

NICOLE HANSEN
400 ROBERT STREET NORTH
ST PAUL, MN 55101
6516653501

FORM IN WHICH APPLICATION SHOULD BE SUBMITTED AND INFORMATION THEY SHOULD INCLUDE:

APPLICATION SHOULD BE SUBMITTED IN WRITING, TO INCLUDE THE NAME OF THE GRANTEE AND A BRIEF DESCRIPTION OF THE PURPOSE

SUBMISSION DEADLINES:

NONE

RESTRICTIONS OR LIMITATIONS ON AWARDS:

IT IS ANTICIPATED THAT GRANTEES WILL BE ORGANIZATIONS THAT ARE EXEMP FROM TAX UNDER IRC §501(C)(3) AND DESCRIBED IN §509(A)(1)

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.

2020

Name: **SECURIAN FINANCIAL FOUNDATION** Employer identification number: **36-3608619**

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	88,182.
2a	Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1	2a	
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	2b	
c	Credit for federal tax paid on fuels (see instructions)	2c	
d	Total. Add lines 2a through 2c	2d	
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	88,182.
4	Enter the tax shown on the corporation's 2019 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	53,831.
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	53,831.

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	<input type="checkbox"/>	The corporation is using the adjusted seasonal installment method.
7	<input checked="" type="checkbox"/>	The corporation is using the annualized income installment method.
8	<input type="checkbox"/>	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. Filers with installments due on or after April 1, 2020, and before July 15, 2020, see instructions		07/15/2020	09/15/2020	12/15/2020
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	9,960.	9,960.	20,454.	13,458.
11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions	15,000.		26,000.	14,000.
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		5,040.		626.
13 Add lines 11 and 12		5,040.	26,000.	14,626.
14 Add amounts on lines 16 and 17 of the preceding column			4,920.	
15 Subtract line 14 from line 13. If zero or less, enter -0-	15,000.	5,040.	21,080.	14,626.
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -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		4,920.		
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	5,040.		626.	

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.

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. <i>(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.)</i> See instructions				
20 Number of days from due date of installment on line 9 to the date shown on line 19.				
21 Number of days on line 20 after 4/15/2020 and before 7/1/2020				
22 Underpayment on line 17 x $\frac{\text{Number of days on line 21}}{366}$ x 5% (0.05)	\$	\$	\$	\$
23 Number of days on line 20 after 6/30/2020 and before 10/1/2020	ATTACHMENT 1			
24 Underpayment on line 17 x $\frac{\text{Number of days on line 23}}{366}$ x 3% (0.03)	\$	\$	\$	\$
25 Number of days on line 20 after 9/30/2020 and before 1/1/2021	SEE PENALTY COMPUTATION WHITEPAPER DETAIL			
26 Underpayment on line 17 x $\frac{\text{Number of days on line 25}}{366}$ x 3% (0.03)	\$	\$	\$	\$
27 Number of days on line 20 after 12/31/2020 and before 4/1/2021				
28 Underpayment on line 17 x $\frac{\text{Number of days on line 27}}{365}$ x 3% (0.03)	\$	\$	\$	\$
29 Number of days on line 20 after 3/31/2021 and before 7/1/2021				
30 Underpayment on line 17 x $\frac{\text{Number of days on line 29}}{365}$ x %	\$	\$	\$	\$
31 Number of days on line 20 after 6/30/2021 and before 10/1/2021				
32 Underpayment on line 17 x $\frac{\text{Number of days on line 31}}{365}$ x %	\$	\$	\$	\$
33 Number of days on line 20 after 9/30/2021 and before 1/1/2022				
34 Underpayment on line 17 x $\frac{\text{Number of days on line 33}}{365}$ x %	\$	\$	\$	\$
35 Number of days on line 20 after 12/31/2021 and before 3/16/2022				
36 Underpayment on line 17 x $\frac{\text{Number of days on line 35}}{365}$ x %	\$	\$	\$	\$
37 Add lines 22, 24, 26, 28, 30, 32, 34, and 36	\$	\$	\$	\$
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				\$ 25.

*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.

Part II Annualized Income Installment Method

		(a)	(b)	(c)	(d)
		First <u>2</u> months	First <u>3</u> months	First <u>6</u> months	First <u>9</u> months
20 Annualization periods (see instructions) . . .	20				
21 Enter taxable income for each annualization period. See instructions for the treatment of extraordinary items	21	477,684.	716,525.	2,710,805.	4,097,289.
22 Annualization amounts (see instructions) . . .	22	6.00000	4.00000	2.00000	1.33333
23a Annualized taxable income. Multiply line 21 by line 22	23a	2,866,104.	2,866,100.	5,421,610.	5,463,038.
b Extraordinary items (see instructions)	23b				
c Add lines 23a and 23b	23c	2,866,104.	2,866,100.	5,421,610.	5,463,038.
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	39,839.	39,839.	75,360.	75,936.
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	39,839.	39,839.	75,360.	75,936.
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	39,839.	39,839.	75,360.	75,936.
30 Applicable percentage	30	25%	50%	75%	100%
31 Multiply line 29 by line 30	31	9,960.	19,920.	56,520.	75,936.

Part III Required Installments

Note: Complete lines 32 through 38 of one column before completing the next column.

		1st installment	2nd installment	3rd installment	4th installment
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	9,960.	19,920.	56,520.	75,936.
33 Add the amounts in all preceding columns of line 32. See instructions	33		9,960.	19,920.	40,374.
34 Adjusted seasonal or annualized income installments. Subtract line 33 from line 32. If zero or less, enter -0-	34	9,960.	9,960.	36,600.	35,562.
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	13,458.	13,458.	13,458.	13,458.
36 Subtract line 38 of the preceding column from line 37 of the preceding column	36		3,498.	6,996.	
37 Add lines 35 and 36	37	13,458.	16,956.	20,454.	13,458.
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	9,960.	9,960.	20,454.	13,458.

PENALTY COMPUTATION DETAIL - FORM 2220

<u>DATE PD</u>	<u>UNDERPAYMENT</u>	<u>BEG.DATE</u>	<u>END DATE</u>	<u>DAYS</u>	<u>%</u>	<u>PENALTY</u>
<u>QUARTER 2, RATE PERIOD 1 (07/15/2020 - 12/31/2020)</u>						
09/15/2020	4,920.	07/15/2020	09/15/2020	62	3	<u>25.</u>
TOTAL TO FORM 2220, LINE 22, COLUMN B						<u>25.</u>
TOTAL UNDERPAYMENT PENALTY						<u>25.</u>

**SCHEDULE D
(Form 1041)**

Department of the Treasury
Internal Revenue Service

Capital Gains and Losses

▶ Attach to Form 1041, Form 5227, or Form 990-T.
▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.
▶ Go to www.irs.gov/F1041 for instructions and the latest information.

OMB No. 1545-0092

2020

Name of estate or trust

Employer identification number

SECURIAN FINANCIAL FOUNDATION

36-3608619

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? Yes No

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Note: Form 5227 filers need to complete **only** Parts I and II.

Part I Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions)

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.				
1b Totals for all transactions reported on Form(s) 8949 with Box A checked.				
2 Totals for all transactions reported on Form(s) 8949 with Box B checked.				
3 Totals for all transactions reported on Form(s) 8949 with Box C checked.				
4 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824				4
5 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts				5
6 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2019 Capital Loss Carryover Worksheet.				6 ()
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). Enter here and on line 17, column (3) on the back				7

Part II Long-Term Capital Gains and Losses - Generally Assets Held More Than One Year (see instructions)

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.				
8b Totals for all transactions reported on Form(s) 8949 with Box D checked.				
9 Totals for all transactions reported on Form(s) 8949 with Box E checked.				
10 Totals for all transactions reported on Form(s) 8949 with Box F checked	35,253,337.	30,791,159.		4,462,178.
11 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824				11
12 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts.				12
13 Capital gain distributions.				13
14 Gain from Form 4797, Part I.				14
15 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2019 Capital Loss Carryover Worksheet.				15 ()
16 Net long-term capital gain or (loss). Combine lines 8a through 15 in column (h). Enter here and on line 18a, column (3) on the back				16 4,462,178.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2020

Part III Summary of Parts I and II		(1) Beneficiaries' (see instr.)	(2) Estate's or trust's	(3) Total
Caution: Read the instructions before completing this part.				
17	Net short-term gain or (loss)	17		
18	Net long-term gain or (loss):			
a	Total for year	18a		4,462,178.
b	Unrecaptured section 1250 gain (see line 18 of the worksheet.)	18b		
c	28% rate gain	18c		
19	Total net gain or (loss). Combine lines 17 and 18a. ▶	19		4,462,178.

Note: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Schedule A (Form 990-T), Part I, line 4a). If lines 18a and 19, column (2), are net gains, go to Part V, and **don't** complete Part IV. If line 19, column (3), is a net loss, complete Part IV and the **Capital Loss Carryover Worksheet**, as necessary.

Part IV Capital Loss Limitation		
20	Enter here and enter as a (loss) on Form 1041, line 4 (or Schedule A (Form 990-T), Part I, line 4c, if a trust), the smaller of:	
a	The loss on line 19, column (3) or b \$3,000	20 ()

Note: If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, page 1, line 23 (or Form 990-T, Part I, line 11), is a loss, complete the **Capital Loss Carryover Worksheet** in the instructions to figure your capital loss carryover.

Part V Tax Computation Using Maximum Capital Gains Rates

Form 1041 filers. Complete this part **only** if both lines 18a and 19 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 23, is more than zero.

Caution: Skip this part and complete the **Schedule D Tax Worksheet** in the instructions if:

- Either line 18b, col. (2) or line 18c, col. (2) is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.

Form 990-T trusts. Complete this part **only** if both lines 18a and 19 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, Part I, line 11, is more than zero. Skip this part and complete the **Schedule D Tax Worksheet** in the instructions if either line 18b, col. (2) or line 18c, col. (2) is more than zero.

21	Enter taxable income from Form 1041, line 23 (or Form 990-T, Part I, line 11)	21		
22	Enter the smaller of line 18a or 19 in column (2) but not less than zero.	22		
23	Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T)	23		
24	Add lines 22 and 23	24		
25	If the estate or trust is filing Form 4952, enter the amount from line 4g; otherwise, enter -0- . . . ▶	25		
26	Subtract line 25 from line 24. If zero or less, enter -0-	26		
27	Subtract line 26 from line 21. If zero or less, enter -0-	27		
28	Enter the smaller of the amount on line 21 or \$2,650	28		
29	Enter the smaller of the amount on line 27 or line 28	29		
30	Subtract line 29 from line 28. If zero or less, enter -0-. This amount is taxed at 0% ▶	30		
31	Enter the smaller of line 21 or line 26	31		
32	Subtract line 30 from line 26	32		
33	Enter the smaller of line 21 or \$13,150	33		
34	Add lines 27 and 30	34		
35	Subtract line 34 from line 33. If zero or less, enter -0-	35		
36	Enter the smaller of line 32 or line 35	36		
37	Multiply line 36 by 15% (0.15) ▶	37		
38	Enter the amount from line 31	38		
39	Add lines 30 and 36	39		
40	Subtract line 39 from line 38. If zero or less, enter -0-	40		
41	Multiply line 40 by 20% (0.20) ▶	41		
42	Figure the tax on the amount on line 27. Use the 2020 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)	42		
43	Add lines 37, 41, and 42	43		
44	Figure the tax on the amount on line 21. Use the 2020 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)	44		
45	Tax on all taxable income. Enter the smaller of line 43 or line 44 here and on Form 1041, Schedule G, Part I, line 1a (or Form 990-T, Part II, line 2). ▶	45		

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side

Social security number or taxpayer identification number

SECURIAN FINANCIAL FOUNDATION

36-3608619

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (D)** Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (E)** Long-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS
- (F)** Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see <i>Column (e)</i> in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	PUBLICALLY TRADED SECURITIES			35253337.	30791159.			4,462,178.
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ►				35253337.	30791159.			4462178.

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

SECURIAN FINANCIAL FOUNDATION
Employer identification number 36-3608619

Part II Balance Sheets			
Schedule I - Investments - Securities			
	2019	2020	2020
	Book Value	Book Value	Market Value
Long term bonds			
American Airlines 2015-1 Class	59,782	-	-
Delta Air Lines 2012-1 Class A	30,841	-	-
Delta Air Lines 2015-1 Class B	110,003	99,923	102,161
Helios Leasing I LLC	40,330	-	-
Municipal Electric Authority	240,835	238,049	304,491
Sinai Health System	155,000	145,000	150,340
U.S. Treasury Bonds	1,093,005	829,204	956,183
United Airlines 2018-1 Class B	229,708	205,869	203,680
Total long term bonds	1,959,505	1,518,045	1,716,855
	-	-	-
Common Stock			
Agree Realty Corp	28,980	22,171	22,171
Alexandria Real Estate Equitie	73,519	48,119	48,119
American Homes 4 Rent	41,490	37,890	37,890
Americold Realty Trust	-	9,146	9,146
Apartment Investment & Managem	32,126	-	-
AvalonBay Communities Inc	57,038	63,370	63,370
Boston Properties Inc	37,774	49,061	49,061
Brixmor Property Group Inc	-	36,493	36,493
Camden Property Trust	35,862	33,873	33,873
CareTrust REIT Inc	-	14,528	14,528
Cousins Properties Inc	7,375	22,747	22,747
Crown Castle International Cor	13,504	-	-
CubeSmart	18,762	14,318	14,318
CyrusOne Inc	-	44,695	44,695
Digital Realty Trust Inc	69,090	58,455	58,455
Douglas Emmett Inc	33,847	25,678	25,678
Duke Realty Corp	72,530	53,440	53,440
EPR Properties	17,166	-	-
Equinix Inc	98,062	124,267	124,267
Equity Lifestyle Properties In	8,024	25,281	25,281
Equity Residential	44,263	43,689	43,689
Essential Properties Realty Tr	-	6,148	6,148
Essex Property Trust Inc	45,731	11,396	11,396
Extra Space Storage Inc	25,666	39,740	39,740
Federal Realty Investment Trus	-	9,789	9,789
FIRST INDUSTRIAL REALTY TRUST	21,793	15,588	15,588
Four Corners Property Trust In	23,482	-	-
Gaming and Leisure Properties	3,014	3,510	3,510
Healthcare Trust of America In	15,079	13,990	13,990
Healthpeak Properties Inc	55,255	42,564	42,564
Highwoods Properties Inc	4,011	11,176	11,176
Host Hotels & Resorts Inc	41,793	42,910	42,910
Invitation Homes Inc	45,225	51,797	51,797
iShares Core S&P Mid-Cap ETF	3,737,691	4,450,658	4,450,658
iShares Broad USD Investment G	7,934,630	7,978,018	7,978,018
iShares Core MSCI Internationa	4,831,891	8,744,064	8,744,064
iShares Core International Agg	4,586,197	4,912,754	4,912,754
iShares Broad USD High Yield C	3,163,755	3,790,226	3,790,226
Kilroy Realty Corp	36,580	25,026	25,026
Kimco Realty Corp	-	17,562	17,562
Life Storage Inc	-	22,087	22,087
Macerich Co/The	16,906	-	-
MGM Growth Properties LLC	-	10,016	10,016
Mid-America Apartment Communit	-	36,107	36,107
Securian AM Dynamic Managed	15,010,216	14,810,978	14,810,978
National Retail Properties Inc	-	15,345	15,345
Omega Healthcare Investors Inc	22,022	26,150	26,150
Park Hotels & Resorts Inc	-	15,178	15,178

SECURIAN FINANCIAL FOUNDATION
Employer identification number **36-3608619**

Part II Balance Sheets			
Schedule I - Investments - Securities			
	2019	2020	2020
	<u>Book Value</u>	<u>Book Value</u>	<u>Market Value</u>
Pebblebrook Hotel Trust	14,826	14,476	14,476
Physicians Realty Trust	19,016	5,411	5,411
Prologis Inc	76,215	161,948	161,948
Public Storage	40,249	70,896	70,896
QTS Realty Trust Inc	20,894	17,945	17,945
Realty Income Corp	26,654	53,280	53,280
Regency Centers Corp	24,857	21,154	21,154
RLJ Lodging Trust	-	18,678	18,678
SPDR Portfolio Emerging Market	4,730,138	6,192,461	6,192,461
SPDR Portfolio Small Cap ETF	1,231,456	2,115,959	2,115,959
Simon Property Group Inc	46,922	60,719	60,719
Spirit Realty Capital Inc	24,590	-	-
STORE Capital Corp	37,128	33,878	33,878
Sun Communities Inc	51,184	34,341	34,341
Terreno Realty Group	-	24,282	24,282
UDR Inc	36,193	50,920	50,920
Ventas Inc	34,240	38,153	38,153
Vanguard S&P 500 ETF	10,184,394	10,979,177	10,979,177
VEREIT Inc	33,264	34,464	34,464
VICI Properties Inc	55,878	42,764	42,764
Vornado Realty Trust	12,968	17,737	17,737
WP Carey Inc	-	12,352	12,352
Weingarten Realty Investors	22,087	20,413	20,413
Welltower Inc	48,823	75,735	75,735
Total common stock	<u>57,082,324</u>	<u>65,927,137</u>	<u>65,927,137</u>
Short term	-	-	-
First American Government Obli	164,487	31,428	31,428
Total short term	<u>164,487</u>	<u>31,428</u>	<u>31,428</u>
Cash equivalents	-	-	-
Wells Fargo & Co	-	-	-
Total cash equivalents	<u>-</u>	<u>-</u>	<u>-</u>
Total	<u>\$ 59,206,316</u>	<u>67,476,610</u>	<u>67,675,420</u>

Return of Private Foundation
SECURIAN FINANCIAL FOUNDATION
 EIN: 36-3608619

NAME	ADDRESS	FEDERAL ID	AMOUNT PAID	Purpose
GREATER TWIN CITIES UNITED WAY	404 S 8TH ST MINNEAPOLIS MN 55404-1027	411973442	\$ 262,000.00	2020 Community Impact Fund
GREATER TWIN CITIES UNITED WAY	404 S 8TH ST MINNEAPOLIS MN 55404-1027	411973442	\$ 150,000.00	Twin Cities Rebuild for the Future Fund
Lifetrack Resources	709 UNIVERSITY AVE W SAINT PAUL MN 55104-4804	410874507	\$ 7,500.00	Lifetrack's Employment Services
The History Theatre, Inc.	30 10TH ST E SAINT PAUL MN 55101-2205	411408420	\$ 10,000.00	History Theatre 2020-2021 General Operations
Twin Cities Public Television	172 4TH ST E SAINT PAUL MN 55101-1492	410769851	\$ 30,000.00	The Power of Media
Local Initiatives Support Corporation	570 Asbury St., Suite 207 Saint Paul MN 55104	133030229	\$ 5,000.00	Resilient Wealth-Building through Bundled Services
Project for Pride in Living (PPL)	1035 E FRANKLIN AVE MINNEAPOLIS MN 55404-2920	237232208	\$ 10,000.00	PPL Career Pathways Programs
Saint Paul & Minnesota Foundations	101 5TH ST E STE 2400 SAINT PAUL MN 55101-1800	416031510	\$ 100,000.00	MN Winter Housing Initiative - Gov. Walz
Saint Paul & Minnesota Foundations	101 5TH ST E STE 2400 SAINT PAUL MN 55101-1800	416031510	\$ 250,000.00	MN Disaster Recovery Fund
Saint Paul & Minnesota Foundations	101 5TH ST E STE 2400 SAINT PAUL MN 55101-1800	416031510	\$ 50,000.00	St. Paul Bridge Fund
Saint Paul & Minnesota Foundations	101 5TH ST E STE 2400 SAINT PAUL MN 55101-1800	416031510	\$ 10,000.00	Community Sharing Fund
Saint Paul & Minnesota Foundations	101 5TH ST E STE 2400 SAINT PAUL MN 55101-1800	416031510	\$ 100,000.00	ConnectedMN #100757
Saint Paul & Minnesota Foundations	101 5TH ST E STE 2400 SAINT PAUL MN 55101-1800	416031510	\$ 50,000.00	Midway United Fund
Volunteers of America of Minnesota	7625 METRO BLVD MINNEAPOLIS MN 55439-3053	411554078	\$ 5,000.00	Amicus Reconnect Program
The Friends of the Saint Paul Public Library	1080 MONTREAL AVE STE 2 SAINT PAUL MN 55116-2692	416029683	\$ 15,000.00	The Friends' Support of Saint Paul Public Library Out-of-school Time Learning Programs
American National Red Cross	1201 West River Parkway Minneapolis MN 55454	530196605	\$ 10,000.00	Building Community Vitality through the Services of the American Red Cross
Citizens League	400 Robert Street North, Suite 1820 St. Paul MN 55101	410722696	\$ 10,000.00	Citizens League General Operating Support
Bolder Options	2100 STEVENS AVE MINNEAPOLIS MN 55404-2533	411909408	\$ 5,000.00	Bolder Options Mentoring Program
Guid	122 Wabasha Street S #400 St. Paul MN 55107-1819	411669233	\$ 8,000.00	Guid Employment Services
Metropolitan Economic Development Association (Meda)	1256 Penn Avenue North, Suite 4800 Minneapolis MN 55411	410977257	\$ 7,500.00	COVID-19 Response: Supporting Minority-Owned Businesses
Como Friends	1225 ESTABROOK DR SAINT PAUL MN 55103-1022	411943928	\$ 7,500.00	Making Memories and Protecting the Legacy of Learning at Como Park Zoo and Conservatory
Minnesota Museum of American Art	350 ROBERT STREET NORTH SAINT PAUL MN 55101-1512	410726138	\$ 7,500.00	General Operating Support
Public Art Saint Paul	381 WABASHA ST N SAINT PAUL MN 55102-1305	411596908	\$ 6,000.00	General Operations
Neighborhood Development Center	663 UNIVERSITY AVE W STE 200 SAINT PAUL MN 55104-5097	411738791	\$ 15,000.00	Recovering and Sustaining Small Business Owners' Economic Independence
Literacy Minnesota	700 RAYMOND AVE STE 180 SAINT PAUL MN 55114-1780	237217182	\$ 5,000.00	Minnesota Literacy and Digital Skills Development
Minnesota Assistance Council for Veterans	1000 University Avenue West St. Paul MN 55104	411694717	\$ 7,500.00	Comprehensive Services for At-Risk and Homeless Veterans
Regions Hospital Foundation	640 Jackson Street, MS 11202C Saint Paul MN 55101	411888902	\$ 25,000.00	Little Moments Count Campaign
Regions Hospital Foundation	640 Jackson Street, MS 11202C Saint Paul MN 55101	411888902	\$ 5,000.00	Interpreter Services and Health Equity
Listening House of St. Paul	464 MARIA AVE SAINT PAUL MN 55106-4429	363291367	\$ 7,500.00	Daytime community resource and referral for homeless adults
NEIGHBORHOOD HOUSE	179 Robie St E SAINT PAUL MN 55107-2360	410693916	\$ 37,382.50	Parking Abatement Match for May 2020
NEIGHBORHOOD HOUSE	179 Robie St E SAINT PAUL MN 55107-2360	410693916	\$ 10,000.00	Neighborhood House Literacy and Adult Education Programming
LIFEWORKS SERVICES INC	2965 LONE OAK DRIVE, SUITE 160 EAGAN MN 55121-3018	410907857	\$ 15,000.00	Career Support for People with Disabilities
COMMONBOND COMMUNITIES	1080 MONTREAL AVE ST PAUL MN 55116-2694	411260469	\$ 10,000.00	Advantage Services
SAINT PAUL CHAMBER ORCHESTRA SOCIETY	408 ST PETER STREET 3RD FLOOR ST PAUL MN 55102-1130	410829498	\$ 35,000.00	The Saint Paul Chamber Orchestra's 2020.21 Annual Fund
University of Minnesota Foundation	200 Oak St SE, Ste 500 Minneapolis MN 55455	416042488	\$ 237,500.00	Capital Campaign Grant
AMHERST H WILDER FOUNDATION	451 LEXINGTON PARKWAY N ST PAUL MN 55104-4636	410693889	\$ 150,000.00	Economic Empowerment
Avivo	1900 Chicago Ave. South Minneapolis MN 55404-1903	410828779	\$ 5,000.00	Employment Services for Financial Stability
BETHEL UNIVERSITY	3900 BETHEL DR SAINT PAUL MN 55112-6999	410708577	\$ 10,000.00	Education
URBAN SQUASH TWIN CITIES	123 Harvard Street SE Minneapolis MN 55455	510607378	\$ 5,000.00	Beyond Walls: Program Accessibility
BIG BROTHERS BIG SISTERS OF THE GREATER TWIN CITIES	3110 Washington Ave N Minneapolis MN 55411	320017737	\$ 7,500.00	Big Brothers Big Sisters Teen Program for Post-Secondary Success
BREAKTHROUGH TWIN CITIES	2051 LARPELLEUR AVE E SAINT PAUL MN 55109-4717	453587267	\$ 7,500.00	College Prep for Highly Motivated, Under-Resourced Youth
COLLEGE POSSIBLE	755 Prior Ave N Ste 200 St. Paul MN 55104-1064	411968798	\$ 10,000.00	College Possible General Operating
COMPAS INC	475 CLEVELAND AVE N STE 222 SAINT PAUL MN 55104-5589	411228092	\$ 5,000.00	COMPAS General Operations: Building Vibrant Communities through the Arts
COOKIE CART	1119 W BROADWAY AVE MINNEAPOLIS MN 55411-2505	411866804	\$ 10,000.00	Youth Social Enterprise Program
FACE TO FACE HEALTH & COUNSELING SERVICE INC	1165 ARCADE ST SAINT PAUL MN 55106-2615	410986780	\$ 37,382.50	General Operating
FACE TO FACE HEALTH & COUNSELING SERVICE INC	1165 ARCADE ST SAINT PAUL MN 55106-2615	410986780	\$ 7,500.00	Face to Face
Jeremiah Program	1510 Laurel Avenue Minneapolis MN 55403	411801834	\$ 6,000.00	Creating Opportunity for Single Moms to Build Well-Being
JUNIOR ACHIEVEMENT OF THE UPPER MIDWEST	1745 UNIVERSITY AVE W ST PAUL MN 55104-3632	411424988	\$ 15,000.00	2020 Support for JA Programs
KEYSTONE COMMUNITY SERVICES	2000 ST ANTHONY AVENUE SAINT PAUL MN 55104-5125	410693924	\$ 5,000.00	Keystone Teen Employment Programs
MINNESOTA COUNCIL ON FOUNDATIONS	800 WASHINGTON AVE NORTH 7TH FLOOR MINNEAPOLIS MN 55401-1330	411269275	\$ 5,850.00	Human Services and Special Community Needs
MINNESOTA EDUCATION EQUITY PARTNERSHIP	2233 UNIVERSITY AVE W STE 220 SAINT PAUL MN 55114-1698	411699505	\$ 5,000.00	General Operating
Minnesota Landmarks	75 W Fifth Street Saint Paul MN 55102-1438	237069422	\$ 4,000.00	Minnesota Landmarks General Operating Request
THE MINNESOTA OPERA	620 N 1ST ST MINNEAPOLIS MN 55401-1225	410946789	\$ 20,000.00	2020-21 Season
MINNESOTA PRIVATE COLLEGE FUND	445 MINNESOTA ST STE 500 SAINT PAUL MN 55101-2123	510166951	\$ 25,000.00	Securian Scholarships
MINNESOTA PRIVATE COLLEGE FUND	445 MINNESOTA ST STE 500 SAINT PAUL MN 55101-2123	510166951	\$ 90,000.00	Securian Financial Scholarships
MINNESOTA PUBLIC RADIO	480 CEDAR ST SAINT PAUL MN 55101-2217	410953924	\$ 13,000.00	Arts
MINNESOTA TEEN CHALLENGE INC	740 E 24th St MINNEAPOLIS MN 55404	411517351	\$ 5,000.00	Lifelong Recovery
MINNESOTA ZOO FOUNDATION	13000 ZOO BLVD APPLE VALLEY MN 55124-4621	510147653	\$ 10,000.00	Force of Nature Campaign
ORDWAY CENTER FOR THE PERFORMING ARTS	345 WASHINGTON ST SAINT PAUL MN 55102-1495	411428998	\$ 55,000.00	Operating Support for the Ordway Center for the Performing Arts
PAGE EDUCATION FOUNDATION	PO BOX 581254 MINNEAPOLIS MN 55458-1254	363605013	\$ 50,000.00	2020 Page Grants and Service to Children
THE SCHUBERT CLUB	75 5TH ST W STE 302 SAINT PAUL MN 55102-1423	410945277	\$ 3,000.00	General Operating
SCIENCE MUSEUM OF MINNESOTA	120 KELLOGG BLVD W SAINT PAUL MN 55102-1202	410706172	\$ 20,000.00	Science Museum of Minnesota
SECOND HARVEST HEARTLAND	7101 Winnetka Ave N Brooklyn Park MN 55428	237417654	\$ 250,000.00	Emergency Food Response - COVID-19
SECOND HARVEST HEARTLAND	7101 Winnetka Ave N Brooklyn Park MN 55428	237417654	\$ 10,000.00	FY21 General Operations
TWIN CITIES RISE	1301 BRYANT AVE N MINNEAPOLIS MN 55411-3257	411761118	\$ 8,000.00	Economic Empowerment
UJAMAA PLACE	1821 University Avenue, Suite N187 St. Paul MN 55104	271216065	\$ 29,390.00	July Parking Abatement Match
UJAMAA PLACE	1821 University Avenue, Suite N187 St. Paul MN 55104	271216065	\$ 15,000.00	Ujamaa Place Theory of Transformation- Education, Employment, Housing
YOUNG MENS CHRISTIAN ASSOCIATION OF THE NORTH	651 NICOLLET MALL STE 500 MINNEAPOLIS MN 55402-1609	452563299	\$ 10,000.00	YMCA Beacons School Success 2021
YOUNG MENS CHRISTIAN ASSOCIATION OF THE NORTH	651 NICOLLET MALL STE 500 MINNEAPOLIS MN 55402-1609	452563299	\$ 150,000.00	North Star Alliance - Community Learning Lab
Young Women's Christian Association of St. Paul	375 Selby Ave. St. Paul MN 55102-1822	410693892	\$ 10,000.00	Youth Development
MINNESOTA CHILDRENS MUSEUM	10 7TH ST W SAINT PAUL MN 55102-2453	411354181	\$ 20,000.00	Building Resiliency for Minnesota Children's Museum
ARTS PARTNERSHIP	345 WASHINGTON ST SAINT PAUL MN 55102-1419	262507419	\$ 5,000.00	2019-20 Season
CHARITIES AID FOUNDATION AMERICA	225 REINCKERS LN STE 375 ALEXANDRIA VA 22314-2848	431634280	\$ 40,000.00	The price of wales charitable fund
MINNESOTA HISTORICAL SOCIETY	345 KELLOGG BLVD W SAINT PAUL MN 55102-1906	410713907	\$ 7,500.00	Annual Request for General Operating Support
Dress for Success Twin Cities	1549 UNIVERSITY AVENUE STE A ST PAUL MN 55104-3907	800480295	\$ 10,000.00	Dress for Success Twin Cities General Operating Support
Minnesota Professional Engineers Foundation MATHCOUNTS	1102 Harmon Ave. West St.Paul MN 55118	416042142	\$ 1,000.00	Minnesota MATHCOUNTS
SUMMIT ACADEMY OIC	935 OLSON MEMORIAL HWY MINNEAPOLIS MN 55405-1359	410908458	\$ 6,000.00	Summit 2025: Building a Black Middle Class
TREE TRUST	1419 Energy Park Drive St. Paul MN 55108	411291626	\$ 5,000.00	Employment Pathways for Young People
BOYS AND GIRLS CLUBS OF THE TWIN CITIES	400 JACKSON ST SAINT PAUL MN 55130-4345	410842657	\$ 50,000.00	K-12 Pathways to Success for Vulnerable Youth
Penumbra Theatre Company, Inc	270 KENT ST SAINT PAUL MN 55102-1744	411563764	\$ 6,000.00	Penumbra's Next Lifecycle
Hired	217 5TH AVE N, 3RD FL MINNEAPOLIS MN 55401-1258	416078344	\$ 10,000.00	Preparing Workers for the Next Economy

Return of Private Foundation
SECURIAN FINANCIAL FOUNDATION
 EIN: 36-3608619

NAME	ADDRESS	FEDERAL ID	AMOUNT PAID	Purpose
The Sanneh Foundation Inc	2090 CONWAY ST Saint Paul MN 55119-4040	562332269	\$ 5,000.00	Conway Community Center
The Sanneh Foundation Inc	2090 CONWAY ST Saint Paul MN 55119-4040	562332269	\$ 29,518.50	June Parking Abatement Match
RAMSEY COUNTY HISTORICAL SOCIETY INC	75 W 5th Street, Ste 323 Saint Paul MN 55102	416009039	\$ 5,000.00	General Operating Support for Ramsey County Historical Society
NAMI MINNESOTA	1919 UNIVERSITY AVE W STE 400 SAINT PAUL MN 55104-3455	411317030	\$ 29,518.50	June Parking Abatement Match
MINNESOTA STATE COUNCIL ON ECONOMIC EDUCATION	116 RUTTAN HALL 1994 BUFORD AVE ST PAUL MN 55108-6040	416040647	\$ 7,500.00	General Operating Support for MCEE Programs
GREATER MSP Regional Economic Development Partnership	400 ROBERT ST N STE 1600 SAINT PAUL MN 55101-2027	274026636	\$ 53,000.00	2020 Greater MSP commitment
Goodwill Industries Inc.	553 FAIRVIEW AVE N SAINT PAUL MN 55104-1708	410706171	\$ 10,000.00	Placement, Retention & Advancement Employment Services in Twin Cities
SAINT PAUL DOWNTOWN ALLIANCE	401 ROBERT ST N ST PAUL MN 55101-2005	824187263	\$ 40,087.00	Business Improvement District Capital Improvements
St. Paul Area Chamber of Commerce Foundation	401 ROBERT ST N STE 150 SAINT PAUL MN 55101-2001	411378952	\$ 29,390.00	July Parking Abatement Match
Twin Cities Habitat for Humanity, Inc.	1954 UNIVERSITY AVE W SAINT PAUL MN 55104-3426	363363171	\$ 20,000.00	Twin Cities Habitat for Humanity Home
Roots for the Home Team	12 Yellow Birch Rd. St Paul MN 55110-1413	462184817	\$ 5,000.00	Roots for the Home Team growth
Black Men Teach	215 10TH AVE S UNIT 712 MINNEAPOLIS MN 55415-2103	831629682	\$ 5,000.00	Black Men Teach Twin Cities
Catholic Charities of the Archdiocese of St Paul and Minneapolis	1200 2ND AVE S MINNEAPOLIS MN 55403-2513	411302487	\$ 100,000.00	FY21 Mission Impact General Operations
Northern Star Council	6202 BLOOMINGTON RD FORT SNELLING MN 55111-2600	203000282	\$ 3,000.00	Exploring Program
TOTAL 2020 CONTRIBUTIONS			\$ 3,097,519.00	
TOTAL 2020 MATCHING GIFTS			\$ 536,869.00	
TOTAL 2020 VOLUNTEER PLUS CONTRIBUTIONS			\$ 3,100.00	
			\$ 3,637,488.00	