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# Form 990-PF Department of the Treasury Internal Revenue Service

**Return of Private Foundation** 

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

▶ Do not enter social security numbers on this form as it may be made public
▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052 **2014**Open to Public Inspection

101	uai	CIIUAI	year 2014 of tax year beginning			, and ending		
Na	ame	of fou	indation				A Employer identificati	on number
	727	~	WD				46 145414	•
			KE FAMILY FOUND			1	46-147414	.0
			treet (or P O box number if mail is not del	vered to street	address)	Room/suite	B Telephone number	4.00
			BRYN WOOD DRIVE				608.238.5	
			, state or province, country, and ZIF		ostal code		C If exemption application is	s pending, check here
			IBURG, WI 53711					
G	Cne	ск ан	that apply: Initial return			ormer public charity	D 1 Foreign organization	ns, check here
			Final return		Amended return		2 Foreign organizations check here and attach	meeting the 85% test,
_	<u> </u>	-1.4	Address cha		Name change		check here and attach	computation
Н	$\overline{}$				cempt private foundation		E If private foundation s	
			n 4947(a)(1) nonexempt charitable		Other taxable private found		under section 507(b)(	
			- 1	J Accounti	=	Accrual	F If the foundation is in	
		ı Part	t II, col (c), line 16)		ther (specify)	hana l	under section 507(b)(	(1)(B), check here
	<u>&gt;\$</u>	I A	141,859 • 1 nalysis of Revenue and Expenses	(Fart I, Colu	mn (d) must be on cash			/d)
	art	പ് പ്	the total of amounts in columns (b), (c), and excessarily equal the amounts in column (a)	i (d) may not )	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
		l Co	ntributions, gifts, grants, etc., receiv	/ed	50,000.		N/A	
	:	_	eck if the foundation is not required to	attach Sch B				
	;	Inte	erest on savings and temporary sh investments		49.	49	•	STATEMENT 1
	4	1 Div	vidends and interest from securities					
	!	<b>a</b> Gro	oss rents					
	-	b Net	rental income or (loss)					
Revenue	2 (	_ Gro	t gain or (loss) from sale of assets not on li oss sales price for all sets on line 6a	ne 10				
9	3		oital gain net income (from Part IV, line 2)			0	•	
ď	-	Ne	t short-term capital gain					
	9		come modifications					
	10	a Gro	oss sales less returns d'allowances					
		<b>b</b> Les	ss Cost of goods sold					
		<b>c</b> Gro	oss profit or (loss)					
	1	1 Oth	ner income					
	12	2 To	tal Add lines 1 through 11		50,049.	49	•	
	13	<b>3</b> Co	mpensation of officers, directors, trustees,	etc	0.	0	•	0.
	14		ner employee salaries and wages					
"	1!		nsion plans, employee benefits	_				
) <del>(5</del>	3 10	ale	gal fees ST	MT 2	204.	0		204.
4 20 Even	3	b Ac	RECEIVED ST	MT 3	1,500.	1,500	•	0.
. તે મું	ادُ		ner professional fees					
<b>?</b>	1	鸣	commerciation and depletion					
APR pistra	11	J CA	xes					
\(\frac{1}{2}\)	2   19		preciation and depletion		<u>-</u>			
$\mathbf{\Omega}$	20		cupa GDEN, UT					
SCANNED APR 2	2		avel, conferences, and meetings		<u></u>			
	2		inting and publications	A COTT	10			
K :	2			MT 4	10.	0	•	0.
တွ	2		tal operating and administrative		1 714	1 500		204
2	5		penses Add lines 13 through 23		1,714.	1,500	•	204.
	2		intributions, gifts, grants paid		4,000.		-	4,000.
	20		tal expenses and disbursements		5,714.	1 500		4 204
	-		d lines 24 and 25 btract line 26 from line 12.		5,/14.	1,500	•	4,204.
	2				11 225			
			cess of revenue over expenses and disbur		44,335.	0		
			t investment income (if negative, enter-			ļ	N/A	
		. 40	TO STEEL THE THE HITTER OF THE CASTILLA APPEAR - A	1-1	,	i .	. 10 / 44	

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For	rm 99	00-PF(2014) ENGELKE FAMILY FOUNDATION			1474140 Page 2
P	art	Balance Sheets   Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	·
Ė	,-		(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing	0.5.504	444 050	444 050
		Savings and temporary cash investments	97,524.	141,859.	141,859.
	3	Accounts receivable ►			
	١.	Less, allowance for doubtful accounts			
	4	Pledges receivable			
		Less: allowance for doubtful accounts			<del></del>
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
Assets		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			
	b	Investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis ▶			
		Less accumulated depreciation			
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers - see the			
_		instructions. Also, see page 1, item I)	97,524.	141,859.	<u>141,859.</u>
	17	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
lab	21	Mortgages and other notes payable			
_	22	Other liabilities (describe )			
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
ß		and complete lines 24 through 26 and lines 30 and 31			
Net Assets or Fund Balances	24	Unrestricted			
alar	25	Temporarily restricted			
Ä	26	Permanently restricted			
Ĕ		Foundations that do not follow SFAS 117, check here			
Ϋ́		and complete lines 27 through 31			
ts	27	Capital stock, trust principal, or current funds	0.	0.	
SSe	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
ţ	29	Retained earnings, accumulated income, endowment, or other funds	97,524.	141,859.	
Š	30	Total net assets or fund balances	97,524.	141,859.	
			05 504	444 050	
_	31	Total liabilities and net assets/fund balances	97,524.	141,859.	
F	art	Analysis of Changes in Net Assets or Fund Ba	alances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
-		st agree with end-of-year figure reported on prior year's return)		1	97,524.
2	•	r amount from Part I, line 27a		2	44,335.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	141,859.
		eases not included in line 2 (itemize)		5	0.
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	141,859.
				· <del></del>	Form <b>990-PF</b> (2014)

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col. (c))
2013	1,000.	50,513.	.019797
2012	0.	49,250.	.000000
2011			
2010			
2009			

2 Total of line 1, column (d)

Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years

4 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5

5 Multiply line 4 by line 3

6 Enter 1% of net investment income (1% of Part I, line 27b)

7 Add lines 5 and 6

8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check th

2 .019797

4 97,093.

.009899

5	961.
6	0

7 961.

8

	_
ine 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.	

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4,204.

See the Part VI instructions.

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P	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948	- see i	nstrı	ıctio	ns)
1 a	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		1			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1				0.
	of Part I, line 27b					
C	All other domestic foundations enter 2% 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				0.
3	Add lines 1 and 2	3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	1			0.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	5				0.
6	Credits/Payments					
a	2014 estimated tax payments and 2013 overpayment credited to 2014 6a					
	Exempt foreign organizations - tax withheld at source 6b	1				
	Tax paid with application for extension of time to file (Form 8868)  6c	1				
	Backup withholding erroneously withheld  6d	1				
7	Total credits and payments. Add lines 6a through 6d	7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8	<del> </del>			
_	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	<del> </del>			0.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid					
10	· · ·	10	<del> </del>			
11 D:	Enter the amount of line 10 to be: Credited to 2015 estimated tax ► Refunded ►  Int VII-A Statements Regarding Activities	11				
				Ι .	Yes	No
12	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	IN			162	+
	any political campaign?	,,,		1a		X
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition	-		1b_		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish	∌d or				
	distributed by the foundation in connection with the activities					
	Did the foundation file Form 1120-POL for this year?			1 c		Х
C	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. $\blacktriangleright$ \$ 0. (2) On foundation managers $\blacktriangleright$ \$ 0.	-				
ε	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers ► \$O.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	)r				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N	1/A	4b		ļ
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		İ	5		X
	If "Yes," attach the statement required by General Instruction T		!			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		i			
	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.	a law				
	remain in the governing instrument?			6	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	/		7	X	
			l			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	WI					
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 General Instruction G? If "No," attach explanation		ļ	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	endar	İ			
	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		x
_10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		İ	10		X
			Fore		-PF	(2014)

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	art VII-A Statements Regarding Activities (continued)		
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)	_11_	Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?		
	If "Yes," attach statement (see instructions)	12	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X
	Website address ► N/A		
14	The books are in care of ► THE FOUNDATION Telephone no ► 608.2	<u> 238.5</u>	400
	Located at ► 3002 BRYN WOOD DRIVE, FITCHBURG, WI	<u> 53711</u>	<u>-5837</u>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		ightharpoons
	and enter the amount of tax-exempt interest received or accrued during the year		/A
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,		Yes No
	securities, or other financial account in a foreign country?	16	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the		
_	foreign country		
Pa	art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes No
1 a	During the year did the foundation (either directly or indirectly).		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		
	a disqualified person?		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes X No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes X No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available		
	for the benefit or use of a disqualified person)?		
	(6) Agree to pay money or property to a government official? (Exception Check "No"		
	if the foundation agreed to make a grant to or to employ the official for a period after		
	termination of government service, if terminating within 90 days.)		
D	olf 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	
	Organizations relying on a current notice regarding disaster assistance check here		
C	EDID the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		
0	before the first day of the tax year beginning in 2014?  Taxes on follows to distribute vectors (costion 4042) (does not each to vector the foundation was a sweet as a set of cost of the	1c	X
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)): At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning		
a	before 2014?  Let the end of tax year 2014, and the foundation have any undistributed income (lines od and be, Part XIII) for tax year(s) beginning  Yes X No.		
	TOWN THE THE TANK THE		
h	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> 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 <b>any</b> of the years listed in 2a, list the years here.	20	
·			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		
	during the year?		
h	of "Yes," did it have excess business holdings in 2014 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 Schedule C,		
	Form 4720, to determine if the foundation had excess business holdings in 2014)  N/A	3ь	
<b>4</b> a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	74	
	had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b	X

orm 990-PF (2014) ENGELKE FAMILY FOUNDATIO	N, INC.	Domition of the second	46-14741	<u> 40</u>	Page 6
The state of the s	-orm 4720 May be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to	10.151.110	<u> </u>	[ <del>1</del> 27]		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es X No		
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire		[ <del></del> ]		
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
4945(d)(4)(A)? (see instructions)			es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f				
the prevention of cruelty to children or animals?		Ye	es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	n Regulations		ŀ	
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	ere				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it mainta	ined			
expenditure responsibility for the grant?			s No		
If "Yes," attach the statement required by Regulations section 53 4945					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to j				-	
a personal benefit contract?	pay promisimo on		es X No	- 1	
<ul><li>b Did the foundation, during the year, pay premiums, directly or indirectly, on a p</li></ul>	erconal hanafit contract?		is LAL NU	6b	x
	ersonal benefit contract.		-	05	
If "Yes" to 6b, file Form 8870	h-lbt		es X No		
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y6	F	7.	<del> </del>
b If "Yes," did the foundation receive any proceeds or have any net income attributed and income attributed and inco			N/A	7b	
Part VIII Information About Officers, Directors, Trustors Paid Employees, and Contractors	ees, Foundation Ma	inagers, Higni	<b>/</b>		
1 List all officers, directors, trustees, foundation managers and their	compensation				
Elot all officero, an octoro, a actoro, four adator managero and affor	(b) Title, and average	(c) Compensation	(d) Contributions to	1 1	e) Expense
(a) Name and address	hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	ac	e) Expense count, other
DODEDM W BUGBI VE	to position	enter -0-)	compensation	1 6	illowances
	PRESIDENT, TR	EASURER,	DIRE		
3002 BRYN WOOD DRIVE	0.50				^
FITCHBURG, WI 53711	0.50	0.	0.	·	0.
	VICE PRESIDEN	T, SECRET	ARY,		
3002 BRYN WOOD DRIVE		_	_		
FITCHBURG, WI 53711	0.50	0.	0.	.	0.
	DIRECTOR				
3002 BRYN WOOD DRIVE					
FITCHBURG, WI 53711	0.25	0.	0.		0.
CHRISTOPHER R. ENGELKE	DIRECTOR				
3002 BRYN WOOD DRIVE					
FITCHBURG, WI 53711	0.25	0.	0.		0.
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(6	e) Expense count, other
(a) Name and address of each employee paid more than \$50,000	devoted to position	(c) Compensation	and deferred compensation	aci	llowances
NONE					
		<u> </u>			
Total number of other employees paid over \$50,000			<b></b>	1	0
	· <del>.</del> ·	<del></del>	Form	990	-PF (2014)

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service	e	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	<u> </u>	0
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.	E	xpenses
1 N/A		
2		
3		
<u></u>		
		<del></del>
4		
Part IV R Common of Drawon Deleted Investments		<del></del>
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1 N/A	<u>'</u>	Amount
1 N/A		
2		
<u> </u>		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	<b></b>	0.
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Pą	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, see instructions)	
1 F	air market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a A	Average monthly fair market value of securities	1a	0.
b /	Average of monthly cash balances	1b 98	0. ,572.
c F	air market value of all other assets	1c	
<b>d</b> 1	Fotal (add lines 1a, b, and c)	1d 98	,572.
e F	Reduction claimed for blockage or other factors reported on lines 1a and		
	Ic (attach detailed explanation) 1e 0.		
2 /	Acquisition indebtedness applicable to line 1 assets	2	0.
3 5	Subtract line 2 from line 1d	3 98	,572.
4 (	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4 1	,479.
5 I	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4.	5 97	,093.
6	Minimum investment return Enter 5% of line 5	6 4	,855.
	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations ar		
	foreign organizations check here 🕨 🔛 and do not complete this part.)		
1 1	Minimum investment return from Part X, line 6	1 4	,855.
2a 1	Fax on investment income for 2014 from Part VI, line 5		
b I	ncome tax for 2014. (This does not include the tax from Part VI )		
c /	Add lines 2a and 2b	2c	0.
3 [	Distributable amount before adjustments. Subtract line 2c from line 1	3 4	,855.
4 F	Recoveries of amounts treated as qualifying distributions	4	0.
5 /	Add lines 3 and 4	5 4	,855.
6 i	Deduction from distributable amount (see instructions)	6	0.
7 I	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7 4	,855.
Pa	rt XII Qualifying Distributions (see instructions)		
1 /	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a l	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a 4	,204. 0.
	Program-related investments - total from Part IX-B	1b	0.
	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
	Amounts set aside for specific charitable projects that satisfy the:		
	Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3b	
	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4		,204.
	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ncome. Enter 1% of Part I, line 27b	5	0.
	Adjusted qualifying distributions. Subtract line 5 from line 4		,204.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (	· · · · · · · · · · · · · · · · · · ·	
	4940(e) reduction of tax in those years.	•	

Form **990-PF** (2014)

# Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	( <b>d)</b> 2014
1 Distributable amount for 2014 from Part XI, line 7				4,855.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			1,762.	
<b>b</b> Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2014:		0.		
<b>a</b> From 2009				
<b>b</b> From 2010				
<b>c</b> From 2011				
<b>d</b> From 2012				
e From 2013	_			
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2014 from				
Part XII, line 4: ► \$ 4,204.				
a Applied to 2013, but not more than line 2a			1,762.	····
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount				2,442.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
<b>b</b> Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
e 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		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2013. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2014. Subtract lines 4d and 5 from line 1. This amount must				0 440
be distributed in 2015		· · · · · · · · · · · · · · · · · · ·		2,413.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	0			
may be required - see instructions)	0.			
8 Excess distributions carryover from 2009	0.			
not applied on line 5 or line 7  9 Excess distributions carryover to 2015	0.			P. P. P. P. P. P. P. P. P. P. P. P. P. P
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:	0.			
a Excess from 2010				
b Excess from 2011				
c Excess from 2012				
d Excess from 2013				
e Excess from 2014				
423581 11-24-14	<del> </del>		•	Form <b>990-PF</b> (2014)

Form 990-PF (2014) ENGELKE	FAMILY FOU	NDATION, IN	IC.		.74140 Page 10
Part XIV Private Operating F			I-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective for			. ▶ └	] .a.aa	
b Check box to indicate whether the found	1	ng foundation described		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2014	(b) 2013	Prior 3 years (c) 2012	(d) 2011	(a) Total
income from Part I or the minimum	(a) 2014	(0) 2013	(6) 2012	(0) 2011	(e) Total
investment return from Part X for					
each year listed <b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII.					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of exempt activities					
e Qualifying distributions made directly			-		
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon:					
<ul><li>a "Assets" alternative test - enter;</li><li>(1) Value of all assets</li></ul>					
(2) Value of assets qualifying				-	
under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from		,			
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info			if the foundation	n had \$5,000 or me	ore in assets
at any time during t	he year-see instr	ructions.)			
1 Information Regarding Foundation	n Managers:		<u>-</u>		
a List any managers of the foundation wh	o have contributed more	than 2% of the total conf	tributions received by the	e foundation before the clo	se of any tax
year (but only if they have contributed n	nore than \$5,000) (See s	section 507(d)(2) )			
SEE STATEMENT 5	<del></del>				
b List any managers of the foundation wh other entity) of which the foundation ha	o own 10% or more of th	ne stock of a corporation	(or an equally large porti	ion of the ownership of a p	artnership or
• •	s a 10% of greater interes	51			
NONE			<del>-</del>		<u>-</u> -
2 Information Regarding Contribute					
Check here ► X if the foundation of the foundation makes gifts, grants, etc	nly makes contributions (	to preselected charitable	organizations and does	not accept unsolicited requ	ests for funds. If
a The name, address, and telephone num					· · · · · · · · · · · · · · · · · · ·
a The hame, address, and telephone hum	ber or e-mail address or t	me person to whom appi	ications should be addre	ssea.	
<b>b</b> The form in which applications should be	e submitted and informa	tion and materials they s	hould include;		
c Any submission deadlines					
d Any restrictions or limitations on awards	s, such as by geographica	al areas, charitable fields,	kinds of institutions, or	other factors:	

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Form **990-PF** (2014)

Total

nter gross amounts unless otherwise indicated.				section 512, 513, or 514 (e)	
1 Program service revenue	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
	code	<del></del>	Code		
				-	
		<del></del>	+++	-	
	l I	· · · · · · · · · · · · · · · · · · ·			
		<del></del>			
e					-
g Fees and contracts from government agencies		· · · · · · · · · · · · · · · · · · ·			<del></del>
Membership dues and assessments					
Interest on savings and temporary cash					· · · · · · · · · · · · · · · · · · ·
investments			14	49.	
Dividends and interest from securities		<del></del>	14	49.	
Net rental income or (loss) from real estate:					
	<del></del>				
a Debt-financed property				-	
<ul> <li>b Not debt-financed property</li> <li>Net rental income or (loss) from personal</li> </ul>					<del></del> .
property Other investment income			+ +		<u></u>
Gain or (loss) from sales of assets other					<del></del>
than inventory					
Net income or (loss) from special events			<del></del>		
Gross profit or (loss) from sales of inventory					
Other revenue:			<del> </del>		
a	_		_		
- · · · · · · · · · · · · · · · · · · ·					
c	1				
	- <del>    -</del>				
eSubtotal. Add columns (b), (d), and (e)	_		).	4.0	
			<i>J</i> .•	49.	49
Total Add line 12, columns (b), (d), and (e)	. \			13	45
e worksheet in line 13 instructions to verify calculations	<u></u>				
art XVI-B Relationship of Activitie	s to the Accom	plishment of	Exempt P	ırposes	
	ncome is reported in c	olumn (e) of Part XV	 I-∆ contributed	importantly to the accomp	dichment of
ne No Explain below how each activity for which i				importantly to the accomp	MISTIFIE OF
1 '	han by providing funds	for such purposes).			
ne No Explain below how each activity for which the foundation's exempt purposes (other t	han by providing funds	for such purposes).			
	han by providing funds	for such purposes).			
	han by providing funds	for such purposes).			
	han by providing funds	for such purposes).			
	han by providing funds	for such purposes).			
	han by providing funds	for such purposes).			
	han by providing funds	for such purposes).			
	han by providing funds	for such purposes).			

Form **990-PF** (2014)

Form 990-PF				ATION, INC.			74140		age 13
Part XVI	Exempt Organ		sters to a	and Transactions	and Relations	ships With Nonc	haritable	•	
	organization directly or indi	rectly engage in any				tion 501(c) of		Yes	No
	le (other than section 501(c				inizations?				
	rs from the reporting found	ation to a noncharita	ble exempt or	ganization of:					
(1) Cas							1a(1)		X
	ner assets ransactions						1a(2)		X
	ansactions les of assets to a noncharita	hle evernet organiza	tion				15/1)		x
	rchases of assets from a no	. •					1b(1) 1b(2)		X
	ntal of facilities, equipment,	•	or garnization				1b(3)		X
	ımbursement arrangements						1b(4)		Х
( <b>5</b> ) Lo	ans or loan guarantees						1b(5)		Х
( <b>6)</b> Per	rformance of services or me	mbership or fundrai	sing solicitation	ons			1b(6)		X
	g of facilities, equipment, ma						1c		X
	nswer to any of the above is			• •		-		ets,	
	ices given by the reporting f				lue in any transactio	n or sharing arrangeme	nt, show in		
(a) Line no	(b) Amount involved			e exempt organization	(d) D	n of transfers, transactions,			
(a) Eitle 110	(b) Amount involved	(c) Nume o	N/A	compt organization	(b) Description	in or transfers, transactions,	and sharing ar	rangem	ents
			N/A						
						<del></del> :			
									_
	oundation directly or indirec				nizations described			_	_
	on 501(c) of the Code (othe		)(3)) or in sect	tion 527?			Yes	LX	No.
b It Yes,	complete the following sch (a) Name of org		<del></del>	(b) Type of organization	<u>-</u>	(c) Description of relati	onehin		
	N/A	janization		(b) Type of organization	<del></del>	(c) Description of relati	Onsnip		
	H/A								
	~				-				
						<del></del>			
l	der penalties of perjury, I declare d belief, it is true, correct, and cor						May the IRS		
Sign	Himo		. 06	l de	- N	Thus any knowledge	return with th shown below	(see in:	
Here	- Car			4-13-15	Liec	Tier	X Yes		_ No
	gnature of officer or trustee Print/Type preparer's na		Dranararia a	Date	Title Date	Check X If P	TIM		
	* * * * * * * * * * * * * * * * * * * *		Preparer's s	Igriacure	Date	self- employed	IIV		
Paid	RUSSELL L.		RUSSEL	L L. WOLFF.	03/14/15		200089	<b>ΛΩ</b> 3	<b>a</b>
Prepare			<del></del>	W KRAUSE, L		Firm's EIN ► 39			<u>'</u>
Use Onl	у				<del></del>			_ •	
	Firm's address ▶ PC	BOX 7398	3						
	MA	DISON, WI	53707	7398		Phone no. (608	3)249-	662	12

Phone no. (608)249-6622 Form **990-PF** (2014)

### Schedule B

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

Department of the Treasury Internal Revenue Service

#### Schedule of Contributors

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

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Name of the organization Employer identification number ENGELKE FAMILY FOUNDATION, INC. 46-1474140 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, 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 Do not 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 is not covered by the General Rule and/or the Special Rules does not 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 does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

Employer identification number

#### ENGELKE FAMILY FOUNDATION, INC.

46-1474140

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional additional copies of Part I if additional copie	tional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ROBERT M. ENGELKE  3002 BRYN WOOD DRIVE  FITCHBURG, WI 53711	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	SUSAN L. ENGELKE  3002 BRYN WOOD DRIVE  FITCHBURG, WI 53711	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Occash Complete Part II for noncash contributions )

Name of organization

Employer identification number

# ENGELKE FAMILY FOUNDATION, INC.

46-1474140

art II	Noncash Property (see instructions) Use duplicate copies of P	art II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

813551

Name of organi	ization		Employer identification number		
<u>ENGELKE</u> Part III	the year from any one contributor Complete col completing Part III, enter the total of exclusively religious.	utions to organizations described umns (a) through (e) and the follow charitable, etc., contributions of \$1,000 or	and section 501(c)(7), (8), or (10) that total more than \$1,000 for wing line entry. For organizations less for the year (Enter this info once)  \$\\$\\$\$		
(=\ \\)	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 gif	t		
	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		
	Transferee's name, address, and	(e) Transfer of gif	ft 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 gif	t		
	Transferee's name, address, and	I 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 gif	t		
-	Transferee's name, address, and	1 ZIP + 4	Relationship of transferor to transferee		

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CASH I	NVESTMENTS	STATEMENT 1
SOURCE	(A REVE PER B	NUE NET I	(B) NVESTMENT NCOME	(C) ADJUSTED NET INCOME
MORGAN STANLEY		49.	49.	
TOTAL TO PART I, LINE 3		49.	49.	
FORM 990-PF	LEGAL	FEES		STATEMENT 2
DESCRIPTION				CHARITABLE
MICHAEL BEST & FRIEDRICH LLP - RESPONSE TO IRS ON EXEMPT STATUS	204.	0.		204.
TO FM 990-PF, PG 1, LN 16A	204.	0.		204.
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
BAKER TILLY VIRCHOW KRAUSE, LLP - 2013 FORM 990-PF PREPARATION	1,500.	1,500.		0.
TO FORM 990-PF, PG 1, LN 16B	1,500.	1,500.		0.

FORM 990-PF	OTHER E	XPENSES	STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
WISCONSIN DEPARTMENT OF FINANCIAL INSTITUTIONS - ANNUAL FEE	10.	0.		0.	
TO FORM 990-PF, PG 1, LN 23	10.	0.		0.	
FORM 990-PF	PART XV - L	INE 1A ON MANAGERS	S	FATEMENT 5	

NAME OF MANAGER

ROBERT M. ENGELKE SUSAN L. ENGELKE