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form 990-PF

Return of Private Foundation

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

For calendar year 2014 or tax year beginning

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/form990of, ar beginning APR 1, 2014, and ending MAR 31,

Nai	me of foundation			A Employer identification	number
G	RANDE FOUNDATION			20-8316469	1
	nber and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
	01 EAST MAIN STREET	,		(920)269-7	200
	y or town, state or province, country, and ZIP or foreign p	ostal code		C if exemption application is p	
-	OMIRA, WI 53048			,	•
G	Check all that apply: Initial return	Initial return of a former pu	blic charity	D 1. Foreign organizations	s, check here
	Final return	Amended return			
	Address change	Name change		Foreign organizations me check here and attach co	omputation test,
H C	Check type of organization: X Section 501(c)(3) ex	empt private foundation		E If private foundation sta	tus was terminated
		Other taxable private foundation		under section 507(b)(1))(A), check here
I Fa	air market value of all assets at end of year J Accounti	*	Accrual	F If the foundation is in a	
		her (specify)		under section 507(b)(1))(B), check here
		mn (d) must be on cash basis)			(4) =
Pa	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	(a) Revenue and (b) l expenses per books	let investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received	260,000.		N/A	(outs) busic only)
	2 Check I if the foundation is not required to attach Sch B				
	Interest on savings and temporary cash investments			<u> </u>	
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)				
ω.	68 Net gain or (loss) from sale of assets not on line 10				
Š	Gross sales price for all assets on line 6a				
Revenue	7 Capital gain net income (from Part IV, line 2)		0 .	·	
E	8 Net snort-term capital gain				
	9 Income modifications FCEIVED 10a and allowances]			
	D Less Cost of 600s sold				
	c Gross profited (loss) AUG 2 1 2015				
	12 Total. Add lines 1 through 11	260,000.	0.		
-	13 Compensation of officers, brectors, trustees, etc.	0.	0.		0.
	14 Other employee salaries and wages			1	
	15 Pension plans, employee benefits				
Ses	16a Legal fees				
Expenses	b Accounting fees STMT 1	3,520.	0 .		3,520.
ă	c Other professional fees				
<u>×</u>	17 Interest				
trat	18 Taxes			,	
ii	19 Depreciation and depletion				
£	20 Occupancy				
٧Þ	21 Travel, conferences, and meetings				
ᇤ	22 Printing and publications 23 Other expenses STMT 2	81.	0		81.
Ħ		01.	0	•	- 01.
Operating and Administrati	24 Total operating and administrative expenses. Add lines 13 through 23	3,601.	0		3.601.
o	25 Contributions, gifts, grants paid	246,406.		-	3,601. 246,406.
	26 Total expenses and disbursements.				
	Add lines 24 and 25	250,007.	0	.	250,007.
	27 Subtract line 26 from line 12:				,
	a Excess of revenue over expenses and disbursements	9,993.			<u></u>
	b Net investment income (if negative, enter -0-)		0	•	
	c Adjusted net income (if negative, enter -0-)			N/A	
4235	01 4-14 LHA For Paperwork Reduction Act Notice, see	instructions.			Form 990-PF (2014)

LHA For Paperwork Reduction Act Notice, see instructions.

20-8316469

Part I	Part II Balance Sheets Attached schedules and amounts in the description	Beginning of year		End of year		
Parti	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
11	Cash - non-interest-bearing	1,842.	11,835.	11,835.		
	Savings and temporary cash investments					
	Accounts receivable >					
	Less: allowance for doubtful accounts					
4	Pledges receivable					
L	Less; allowance for doubtful accounts					
ſ	Grants receivable					
1 1	Receivables due from officers, directors, trustees, and other					
i i	disqualified persons					
	• •					
	Other notes and loans receivable					
	Less: allowance for doubtful accounts					
無 し	Inventories for sale or use					
88 9	Prepaid expenses and deferred charges					
' IUa	Investments - U.S. and state government obligations					
b	Investments - corporate stock		-	<u> </u>		
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 deprecation					
15	Other assets (describe ►)					
	Total assets (to be completed by all filers - see the		-			
	instructions. Also, see page 1, item I)	1,842.	11,835.	11,835.		
_	Accounts payable and accrued expenses					
	Grants payable	-				
امدا	Deferred revenue					
. <u>e</u>	Loans from officers, directors, trustees, and other disqualified persons					
를 21 1	Mortgages and other notes payable					
E 2	Other liabilities (describe >					
22 '	Other habilities (describe					
	Tatal Habilitian (add lines 17 through 99)	0.	0.			
	Total liabilities (add lines 17 through 22)					
	Foundations that follow SFAS 117, check here					
	and complete lines 24 through 26 and lines 30 and 31.					
≥ I	Unrestricted					
<u>e</u> 25	Temporarily restricted					
	Permanently restricted					
š	Foundations that do not follow SFAS 117, check here					
<u> </u>	and complete lines 27 through 31.					
ပ္က 27	Capital stock, trust principal, or current funds	0.	0.			
8 28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.			
Net Assets or Fund	Retained earnings, accumulated income, endowment, or other funds	1,842.	11,835.			
≥ 30	Total net assets or fund balances	1,842.	11,835.			
_						
31	Total liabilities and net assets/fund balances	1,842.	11,835.			
David I	II Analysis of Changes in Net Assets or Fund B	alances				
Part I	Analysis of Changes in Net Assets of Fund B					
1 Total	net assets or fund balances at beginning of year - Part II, column (a), line	30				
(must	agree with end-of-year figure reported on prior year's return)		[1]	1,842.		
	amount from Part I, line 27a		2	1,842. 9,993.		
	increases not included in line 2 (itemize)		3	0.		
	nes 1, 2, and 3	÷	4	11,835.		
	ases not included in line 2 (itemize)		5	0.		
	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	11,835.		
J . O	Jour June of the Control of th	(0),		Form 990-PF (2014)		

		d(s) of property sold (e. r common stock, 200 st			<u>`</u>	How acquired - Purchase - Donation	(0	e) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.
a									
NO:	NE							· — · · · · · · · · · · · · · · · · · ·	
					_		<u> </u>		
<u> </u>					_				ļ. <u> </u>
<u> </u>			1		Ц,				<u> </u>
(e) Gross sales price		epreciation allowed (or allowable)		st or other basis expense of sale				(h) Gain or (lo: (e) plus (f) minu	
	,		-						
Complete only for assets showin	g gain in co	olumn (h) and owned by	the foundation	on 12/31/69				aıns (Col. (h) ga	
(i) F.M.V as of 12/31/69		Adjusted basis as of 12/31/69		cess of col. (1) col. (1), if any			col. (k L), but not less th osses (from col	nan -0-) or . (h))
Capital gain net income or (net ca	pital loss)	If gain, also ente	er in Part I, line D- in Part I, line	7	}	2			
Net short-term capital gain or (los				•	1	_			
If gain, also enter in Part I, line 8,			iiu (o).		٦l				
If (loss), enter -0- in Part I, line 8		•			ľ	3			
art V Qualification U	nder Se	ction 4940(e) fo	r Reduced	Tax on Net	lnv	estment	Inco	me	
s the foundation liable for the sect yes," the foundation does not qual	fy under se	ction 4940(e). Do not c	omplete this pa	rt.					Yes X
Enter the appropriate amount in e	ach columi		instructions bei	ore making any e					(6)
Base period years Calendar year (or tax year beginnir	ng រោ)	(b) Adjusted qualifying dis		Net value of no	(c) nchai	ritable-use ass		Disti (col. (b) c	(d) ribution ratio livided by col. (c))
2013			51,198.			6,4			39.1518
2012			31,405.			8,2			28.1823
2011			72,115.			5,5			12.9053
2010			73,290.			5,7			12.6689
2009			5,724.			5,7	8/.		11.3571
Total of line 1, column (d)								2	104.2656
Average distribution ratio for the 5 the foundation has been in exister	-	•	on line 2 by 5,	or by the number	of ye	ars		3	20.8531
Enter the net value of noncharitab	le-use asse	ts for 2014 from Part Y	line 5					4	16,07
	030 0330	13 101 20 14 HOM 1 arc A,	, iiiie o						
Multiply line 4 by line 3								5	335,17
Enter 1% of net investment incom	e (1% of P	art I, line 27b)						6	
Add lines 5 and 6								7	335,17
Enter qualifying distributions from	Part XII, lu	ne 4 .						8	250,00
If line 8 is equal to or greater than See the Part VI instructions.	line 7, che	ck the box in Part VI, line	e 1b, and comp	lete that part usin	g a 1º	% tax rate.			

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	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see i	nstru	ction	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.		1			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					_
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🛄 and enter 1%	1				<u>0.</u>
	of Part I, line 27b	ł				
ε.	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	<u> </u>			<u>0.</u>
3	Add lines 1 and 2	3	<u> </u>			0.
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				0.
6	Credits/Payments.	1				
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a					
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	<u> </u>			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11	Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ Refunded ▶	11				
Pai	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interveil	ne in		L	Yes	
	any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition	on)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publis	hed or		i '		
	distributed by the foundation in connection with the activities					
C	Did the foundation file Form 1120-POL for this year?			1c		_X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.					
	(1) On the foundation. \blacktriangleright \$ (2) On foundation managers. \blacktriangleright \$	•				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			1		
	managers ►\$ 0.					
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					
	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			3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	1	N/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			_ 5		X
	If "Yes," attach the statement required by General Instruction T					
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			1		
	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 	ate 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 II	ΚV		<u>_7</u>	Х	
_				1	}	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
_	MN					
	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			8b	X	<u> </u>
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calculation within the meaning of section 4942(j)(3) or 4942(j)(5) for calculation within the meaning of section 4942(j)(3) or 4942(j)(5) for calculation within the meaning of section 4942(j)(3) or 4942(j)(5) for calculation within the meaning of section 4942(j)(3) or 4942(j)(5) for calculation within the meaning of section 4942(j)(3) or 4942(j)(5) for calculation within the meaning of section 4942(j)(3) or 4942(j)(5) for calculation within the meaning of section 4942(j)(3) or 4942(j)(5) for calculation within the meaning of section 4942(j)(3) or 4942(j)(5) for calculation within the meaning of section 4942(j)(6) for calculation within the meaning of sectio	alendar		1.	 	٠
	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			10		X

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had not been removed from jeopardy before the first day of the tax year beginning in 2014?

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Part VII-B Statements Regarding Activities for Which	Form 4/20 May Be I	Requirea (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
(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	or to carry on, directly or indir	• • • • • • • • • • • • • • • • • • • •		
any voter registration drive?			es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		_ L Yo	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)		Y	es 🗓 No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t			
the prevention of cruelty to children or animals?		Y	es 🗶 No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described	ın Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instru	ictions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	nere		▶□	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi	rom the tax because it mainta	ıned		
expenditure responsibility for the grant?	N	I/A 🔲 Y	es 🔲 No	
If "Yes," attach the statement required by Regulations section 53 494.	5-5(d)		İ	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		Y	es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?		es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu			<u> </u>	7b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors		nagers, Highly		<u> </u>
1 List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	account, other allowances
JOHN CANDELA	CHAIR OF THE	BOARD & D	IRECTOR	
301 EAST MAIN STREET				
LOMIRA, WI 53048	0.20	0.	0.	0.
	PRESIDENT & D	IRECTOR		
301 EAST MAIN STREET				
LOMIRA, WI 53048	0.20	0.	0.	0.
TODD H. KOSS	SECRETARY, TR	EASURER &	DIRECTO	R.
301 EAST MAIN STREET		1		
LOMIRA, WI 53048	0.20	0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). 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	devoted to position		compensation	allowances
HOND				
				
				ĺ
				
		1		
		 		
The same of the sa	<u> </u>	<u> </u>		
Total number of other employees paid over \$50,000				0

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All other program-related investments. See instructions.

Total. Add lines 1 through 3

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, s	ee instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities	l 1a	0.
	Average of monthly cash balances	1b	16,318.
	Fair market value of all other assets	1c	·
d	Total (add lines 1a, b, and c)	1d	16,318.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
	Subtract line 2 from line 1d	3	16,318.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	245.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	16,073.
6	Minimum investment return. Enter 5% of line 5	6	804.
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations check here and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	804.
2a	Tax on investment income for 2014 from Part VI, line 5		
	Income 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	804.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	804.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	804.
	Qualifying Distributions (see instructions)		
	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		250 007
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	250,007. 0.
	Program-related investments - total from Part IX-B	1b	U •
	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	250 007
	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	250,007.
	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_	^
	income. Enter 1% of Part I, line 27b	5	0.
	Adjusted qualifying distributions. Subtract line 5 from line 4	6	250,007.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	ualifies for t	ne section
	4940(e) reduction of tax in those years.		

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI,				
line 7				804.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2014:				_
aFrom 2009 65, 435.				
bFrom 2010 73,001.				
cFrom 2011 71,836.				
dFrom 2012 230,994.				
eFrom 2013 250,877.				
f Total of lines 3a through e	692,143.			
4 Qualifying distributions for 2014 from				
Part XII, line 4: ►\$ 250,007.				
a Applied to 2013, but not more than line 2a			0.	
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				804.
e Remaining amount distributed out of corpus	249,203.			
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	941,346.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		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			V .	
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2009				
not applied on line 5 or line 7	65,435.			
9 Excess distributions carryover to 2015.				
Subtract lines 7 and 8 from line 6a	875,911.			
O Analysis of line 9:				
a Excess from 2010 73,001.				
b Excess from 2011 71,836.				
c Excess from 2012 230, 994.				
dExcess from 2013 250,877. eExcess from 2014 249,203.				
e Excess from 2014 249, 203.	1			Form 990-PF (2014)

	FOUNDATION				316469 Page
Part XIV Private Operating F				N/A	
1 a If the foundation has received a ruling of			1		
foundation, and the ruling is effective for			▶	, 	
b Check box to indicate whether the found		ting foundation described		4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII.					
line 4 for each year listed					
d Amounts included in line 2c not		-	<u> </u>		
				·	
used directly for active conduct of					
exempt activities			<u> </u>		
e Qualifying distributions made directly		ļ			İ
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the			<u> </u>		
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)			-		
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part 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)			Ì		
(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					<u></u>
Part XV Supplementary Information at any time during the second s			if the foundation	n had \$5,000 or r	nore in assets
<u></u>					
J J	_	s them 00/ of the total and		- f d-1 b-f 1b	
a List any managers of the foundation who year (but only if they have contributed m			uributions received by the	e toundation before the d	lose of any tax
	οιο επαιτ φο,σσο). (σσο	30011011 301 (4)(2).)			
NONE	noum 100/ or more of t	the stanti of a service	·/		
 b List any managers of the foundation who other entity) of which the foundation has 			(or an equally large port	ion of the ownership of a	partnership or
NONE	ū				
	0	. O-b-lb4 F	· -		
2 Information Regarding Contribution Check here If the foundation or					
the foundation makes gifts, grants, etc. (organizations and does		
a The name, address, and telephone numb				<u></u>	
a The hame, address, and telephone humb	er or e-man address or	the person to whom app	ilications should be addre	:556u.	
SEE STATEMENT 3					
b The form in which applications should be	submitted and inform	ation and materials they	should include:		
c Any submission deadlines;					
d Any restrictions or limitations on awards	, such as by geographic	cal areas, charitable fields	, kinds of institutions, or	other factors:	

3 O Supplementary information			·	1
3 Grants and Contributions Paid During the	e 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	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year SEE STMT A ATTACHED	l vova			
SEE STAT A ATTACHED	NONE		GENERAL SUPPORT	246,406.
				240,400.
Total .		-	. ▶ 3a	246,406.
b Approved for future payment				
SEE STMT B ATTACHED	NONE		GENERAL SUPPORT	3,180.
Total			▶ 3b	3,180.
				Form 990-PF (2014)

Part XVI-A Analysis of Income-Producing Activities

nter gross amounts unless otherwise indicated.	Unrelate	ed business income	Exclu	ided by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	7	code	741100110	I Bricacii inocine
<u>a</u>	<u> </u>		<u> </u>		
b					
<u> </u>			ļ		
d	L				
e			 		
·	<u> </u>		! —		
g Fees and contracts from government agencies			<u> </u>		
2 Membership dues and assessments			ļ		
3 Interest on savings and temporary cash					
investments	<u></u>				
4 Dividends and interest from securities			<u> </u>		
5 Net rental income or (loss) from real estate:			<u> </u>		
a Debt-financed property	<u></u>		<u> </u>		
b Not debt-financed property	ļ		⊢ –		
6 Net rental income or (loss) from personal					
property	L				
7 Other investment income			<u> </u>		
8 Gain or (loss) from sales of assets other					
than inventory			ļ		
9 Net income or (loss) from special events			<u> </u>		
O Gross profit or (loss) from sales of inventory			ļ		
1 Other revenue:			ļ		
å			<u> </u>		
b	<u> </u>		 	<u> </u>	
<u> </u>			<u> </u>		
d			├		
e 12 Subtotal. Add columns (b), (d), and (e)		0.	-	0.	0.
3 Total. Add line 12, columns (b), (d), and (e)				13	0.
See worksheet in line 13 instructions to verify calculations.)				"-	
				A D	
Part XVI-B Relationship of Activities to	o the Acci	omplishment of Ex	temp	urposes	
Line No. Explain below how each activity for which incor			contri	outed importantly to the accon	nplishment of
the foundation's exempt purposes (other than t	by providing tu	nds for such purposes).			
N/A		·			
			_		
					
					
		<u> </u>		_	
					
		<u> </u>			
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		·			
23621 1-24-14			_		Form 990-PF (2014)

Part 2	KVII	Information Re Exempt Organ		sfers To	and Transactions	and Relation	ships With Nor	ıcharitable	Э	
1 Did	the or			of the follows	ng with any other organizat	tion described in sec	etion 501(c) of		Yes	No
					27, relating to political orga		Sudif So I(C) Of	i	103	140
						ilikations,				
		from the reporting found	ation to a noncharta	nie exempt or	ganizadon of.			1a(1)		х
(1) Cash										
(2) Other assets b Other transactions;										
		_								
		of assets to a noncharita						1b(1)		X
	_	nases of assets from a no		organization			-	1b(2)		X
		ıl of facılıtıes, equipment,						1b(3)		X
		bursement arrangements					-	1b(4)		X
		s or loan guarantees					-	1b(5)		X
		rmance of services or me	•	-				1b(6)	L	X
		f facilities, equipment, ma						10	ll	X
					edule. Column (b) should a				ets,	
		s given by the reporting n I) the value of the goods,			red less than fair market va	iue in any transactio	n or snaring arrangen	ient, snow in		
(a)Line no		(b) Amount involved			e exempt organization	(d) Description	on of transfers, transaction	s. and sharing ar	ranceme	nts
	\top	··		N/A			····		<u> </u>	
	1									
				<u> </u>						
		 								
-	\bot				<u> </u>					
	-									
	-					-				
	+									
	+-	-			···					
	+									—
	+-	<u> </u>		· · · · · ·					-	—
2a Is th	ne foun	idation directly or indirect	L	elated to, one	or more tax-exempt organ	uzations described				
		501(c) of the Code (other						Yes	X	No
		mplete the following sch	` '							
		(a) Name of org			(b) Type of organization		(c) Description of rel	ationship		
		N/A	-							
							-			
					_					
		<u> </u>			,					
						1				
C:					ng accompanying schedules and in taxpayer) is based on all infor			May the IRS o	iscuss t	nis
Sign Here		Interest	0//		ماروا			shown below		
11616	Curr			<u> </u>	18/13/2015			_ X Yes		J No
	əign	ature of officer or trustee		Duame : : 4:	Date	Title	Charle	DTIN		
		Print/Type preparer's na	ıme	Preparer's s	ignature	Date	ا سب	PTIN		
Paid		CADAU DECE	TENT	Sam	un Redden	0/11/15	self- employed	500000	F 2 4	
							P00898			
Use C	- 1	Filin's name DEL	OITTE TAX	LLP			Firm's EIN ► 86)-T002/	14	
	,	Firm's address ► 50	SOUTH ST	УТН СТ	REET, STE 28	300				
	Firm's address > 50 SOUTH SIXTH STREET, STE 2800 MINNEAPOLIS, MN 55402 Phone no. 612-397-4000									

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** GRANDE FOUNDATION 20-8316469 Organization type (check one): Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt chantable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** In 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, chantable, 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 **\$**

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).

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),

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization

Employer identification number

GRAND	E FOUNDATION	20	0-8316469
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	GRANDE CHEESE COMPANY P.O. BOX 67, DAIRY ROAD BROWNSVILLE, WI 53006	s260,000.	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 Payroli Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
23452 11-0	5-14	Schedule B (Form	990, 990-EZ, or 990-PF) (2014)

Schedule of Grants						
Recipient	Recipient's Address	Status	Amount			
escon House PO Box 1524 FDL W1 54936-1524			500 0			
The Volunteer Center	650 N Main St FDL WI 54935	PC	1,500 0			
Thelma Sadoff Center for the Arts Inc	51 Sheboygan Street, Fond du Lac, WI 54935	PC	10,000 0			
The Volunteer Center	650 N Main Street Fond du Lac, WI 54935	PC	500 0			
FOND DU LAC AREA WOMEN'S FUND	PO Box 1171 Fond du lac, WI 54936	PC	800 D			
Boys and Girls Club	76 W 2nd Street, PO Box 562, Fond du Lac, WI 54936	PC	2,000 0			
Fond du Lac Area Association Foundation	207 N Main Street, Fond du Lac, WI 54935	PC	10,000 0			
	Total Community Support Programs		\$ 25,300.0			
Moraine Park Foundation Inc	235 N National Ave PO Box 1940 FDL, WI 54936-1940	PC	1,000 0			
UW-L Foundation/Industrial	1725 State St., La Crosse WI 54601	PC	400 0			
Marian University	45 S National Ave Fond du Lac, Wt 54935	PC	250 0			
Midwest Dairy Foods Research Ctr	PO Box 70820, Saint Paul, MN, 55170-3854	PC	5,000 0			
UW Foundation/CDR	WI Center for Dairy Research 1605 Linden Dr Room 245 Madison, Wi 53706-1519	PC	7,500 0			
Marian University	45 S National Ave Fond du Lac, WI 54935	PC	1,000 0			
Manan University Alumni Assoc	45 S National Ave Fond du Lac, WI 54935	PC	1,000 0			
University of WI Foundation	Madison, WI 53726-4090	PC	125,000 0			
UW-Fond du Lec Foundation- corks and forks	400 University Drive, Fond du Lac, WI 54935	PC	750 0			
	Total Educational Programs		\$ 141,900.00			
Astop	430 E Division St , FDL WI 54935	PC	1,000 0			
The Arc of Fond du Lac	500 N Park Ave , FDL WI 54935	PC	1,000 0			
Friends of Kenny Warren	5 Park Dr Melville, NY 11747	PC	8,200 0			
Agnesian Healthcare Foundation- Chanty Open	430 E Division St., FDL WI 54935	PC	1,500 0			
Lutheran Homes & Health Services Foundation Inc	244 N Macy Street, Fond Du Lac, WI 54935	PC	1,000 0			
The Salvation Army	237 N Macy Street Fond du Lac, WI 54936	PC	500 00			
Agnesian Healthcare Foundation	430 E Division Street Fond du Lac, WI 54935	PC	5,100 00			
Fond du Lac Area Foundation	384 N Main Street, Ste 4, Fond du Lac, WI 54935	PC	5,000 00			
Avenue 91 1	PO Box 578 Green Bay, WI 54305	PC	15,000 00			
The Arc of Fond du Lac	500 N Park Ave , FDL WI 54935	PC	5,000 00			
Monroe Woman's Club	PO Box 733 Monroe, WI 53566	PC	2,406 00			
Shriners Hospital for Children	1900 Richmond Rd, Lexington, KY 40502-1204	PC	500 00			
Badger Childhood Cancer Network	PO Box 5624 Madison, WI 53705	PC	1,200 00			
Solutions Center	PO BOX 1752 FOND DU LAC, WI 54937-1752	PC	1,800 00			
St Vincent De Paul Society- sam conference	14 Naber Street, Mayville, WI 53050	PC	1,000 00			
Green County Food Pantry	1129 17th Ave Monroe WI 53566	PC	2,000 00			
Habitat for Humanity	65 W Scott Street Fond du Lac Wt 54935	PC	1,500 00			
Agnesian Healthcare Foundation	430 E Division St., FDL WI 54935	PC	300 00			
Beacon House- Friends of Women in Recovery	PO Box 1524 FDL WI 54936-1524	PC	500 00			
	Total Health and Human Services		\$ 54,506 00			
Big Brothers Big Sisters	448 S Military Rd, Fond du Lac, WI 54935	PC	1,000 00			
Big Brothers Big Sisters	448 S Military Rd, Fond du Lac, WI 54935	PC	2,000 00			
Children's Museum of FDL	75 W Scott St Fond du Lac Wi 54935	PC	6,500 00			
Boys and Girts Club	76 W 2nd Street, PO Box 562, Fond du Lac, WI 5493£	PC	8,000 00			
Theima Sadoff Center for the Arts Inc	51 Sheboygan Street, Fond du Lac, WI 54935	PC	1,200 00			
Big Brothers Big Sisters	448 S Military Rd, Fond du Lac, WI 54935	PC	6,000 00			
	Total Youth Programs		\$ 24,700 00			
	Total Program Services		\$ 246,406.00			

Gran	+ 0	~~~	itma	-
Gran	TL	mm	ırme	THE S

	Ciail Committee			
Recipient	Recipient's Address	Status	Amount	
Fond du Lac Family YMCA	90 W Second St, FDL WI 54935	PC	1,500 00	
	Total Community Support Programs		\$ 1,500.00	
Winnebago County Literacy Council	106 Washington Ave Oshkosh WI 54901-4933 Total Health & Human Services	PC	1,680 00 \$ 1,680,00	
	Total Health & Hullian Gervices		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	TOTAL GRANT COMMITMENTS		\$ 3,180.00	

FORM 990-PF	ACCOUNTING FEES		. STATEMENT 1		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING FEES	3,520.	0.		3,520.	
TO FORM 990-PF, PG 1, LN 16B	3,520.	0.		3,520.	
FORM 990-PF	OTHER EXPENSES		STATEMENT 2		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
LICENSES AND FILING FEES	81.	0.		81.	
TO FORM 990-PF, PG 1, LN 23	81.	0.		81.	

20-8316469

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

3

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

THE GRANDE FOUNDATION 301 EAST MAIN STREET LOMIRA, WI 53048

TELEPHONE NUMBER

(920)269-7200

FORM AND CONTENT OF APPLICATIONS

ORGANIZATION'S NAME, ADDRESS, TELEPHONE NUMBER, AND CONTACT PERSON INFORMATION. ALSO, A BRIEF DESCRIPTION OF THE ORGANIZATION'S MISSION AND PURPOSE, A COPY OF THE 501(C)(3) NON-PROFIT STATUS, A DESCRIPTION OF THE NEED BEING ADRESSED AND A DESCRIPTION OF HOW THE GRANT WILL BE USED, A DESCRIPTION OF MEASUREMENTS USED TO DETERMINE EFFECTIVENESS, AND A COMPLETE BUDGET FOR THE PROJECT.

ANY SUBMISSION DEADLINES

N/A

RESTRICTIONS AND LIMITATIONS ON AWARDS

N/A