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Form **990-PF**

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.

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Depreciation and depletion Occupancy Travel, conferences, and meetings Printing and publications Other expenses Total operating and administrative expenses. Add lines 13 through 23 Contributions, gifts, grants paid Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) Depreciation and depletion 49,518. 50,545. 0. 195,000. 195,000.	For ca	lendar year 2015 or tax year beginning		, and ending	,	
Poor Visible Poor	Name	e of foundation		A Employer identificatio	n number	
1.0.2 LIMBRILIAN DRIVE (A) or town, state or provened, country, and 2P or fereign postal code NERNAH, WI 54956-4274 (B) Check all that apply: Find return Find return return plus test from securities for a find return of a former public charry Find return return plus test from securities for a find return of a former public charry Find return return plus test from securities for a find return of a former public charry Find return return plus test from securities for a find return of a former public charry Find return return plus test from securities for a find return of a former public charry Find return return plus test from securities for a find return for a find return of a former public charry Find return return plus test from securities for a find return for a find return for a find return ret	_DE	ITRICH FAMILY FOUNDATION	, INC)
Cover forms, state of provence, country, and ZPP or freegn postal code NESHAH, WI 54956-4274 6 Check all that apply: Initial return Anamodof return Accounter before an anamodof return Ana		•	address)	Room/suite	· '	506
NERNAH, WI 54956-4274						
6 Check all that apply:	•		ISTAI CODE		If exemption application is	pending, check here
Foreign organization: X Address change Name change			Initial return of a fo	rmer public charity	D 1. Foreign organization	s, check here
Check type of organization: X Section 501(c)(3) exempt private foundation Section 4947(s)(1) measuring that risks the trust Other tissable private foundation Fill remarked two of all assets and only 3rd Accounting method: X Cash Accounting the private foundation Fill remarked two of all assets and only 3rd Accounting method: X Cash Accounting the private foundation Fill remarked two of a section 507(b)(1)(a), deck here Accounting the private foundation Fill remarked two of the private fo	u on					
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Contributions, grifs, prants, etc., received A_298_304_ (Part I, coulturn (et) must be on cash basis.) Contributions, grifs, prants, etc., received Contributions, grifs, grants, paid Contributions, grifs, grants paid Con					under section 507(b)(1)(A), check here
Part		· —	•	Accrual		
Part	-	m Part II, col. (c), line 16)	ner (specity) nn (d) must be on cash b	pasis.)	under section 507(b)(1)(B), check here
The total of amounts a columns (b), (as and (s) may not recovered to a column (b)). In contributions, gifts, grants, etc., received 325,000. N/A 1 Contributions, gifts, grants, etc., received 325,000. N/A 2 Check— If als faudations is at required to attack shi 8 and a column (b). The contributions and interest from securities 73,269. 73,269. STATEMENT 1 4 Dividends and interest from securities 73,269. 73,269. STATEMENT 2 8 Net pain or (loss) from sale of assets not on line 10 b. Gross-sales pring for all 3,173,715. 7 Capital gene ret. income (from Part IV, line 2) 8 Net short-term capital gian in the concent (from Part IV, line 2) 9 Income modifications 10 c. Gross soften later returns b. Line (loss) for the column (loss) for the c		+ I Analysis of Revenue and Expenses	1		(c) Adjusted net	
2 Cheek		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	\ = /		
Interest on awarga and temporary	\Box	1 Contributions, gifts, grants, etc., received	325,000.		N/A	
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D Net rantal income or (loss) 104,102. 3,173,715. 3,173,715. 104,102. 3,173,715. 104,102. 3,173,715. 104,102. 3,173,715. 104,102. 3,173,715. 104,102. 3,173,715. 104,102		_	73,269.	73,269.		STATEMENT Z
Sa Not gain or (loss) from sale of assets not on line 10 104,102						
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10a and allowances b Less Cost of goods sold c Gross profit or (loss)	æ	8 Net short-term capital gain				
10 10 10 10 10 10 10 10						
C Gross profit or (loss)		10a and allowances				
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b Net investment income (if negative, enter -0-)		Subtract line 26 from line 12:				
		·	257,864.	100 000		
NT / 7	ļ			126,837.	N/A	-
c Adjusted net income (if negative, enter -0-) 523501 11-24-15 LHA For Paperwork Reduction Act Notice, see instructions. Form 990-PF (2015)	52350	L MAJUSTER HEL HICOME (I negative, enter -0-)	instructions		1 11/12	Form 990-PF (2015)

Cash - non-interest-bearing Cash	C 27-1474080 Page 2 g of year End of year
1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Accounts receivable ▶ Less: allowance for doubtful accounts ▶ 4 Pledges receivable ▶ Less: allowance for doubtful accounts ▶ 5 Grants receivable ▶ Less: allowance for doubtful accounts ▶ 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other reties and less receivable 8 Inventiones for said offerred charges 9 Prepaid expenses and deferred charges 10a Investments - corporate stock 9 Prepaid expenses and deferred charges 10a Investments - corporate stock 11 Investments - corporate bonds 11 Investments - corporate bonds 11 Investments - origorate bonds 11 Investments - origorate bonds 12 Investments - origorate plans 13 Investments - origorate plans 14 Land, buildings, and equipment; basis ▶ 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Less tem officers, directors, trustees, and other disqualified persons 21 Mortgages and tem notes payable 22 Other liabilities (add lines 17 through 22) 23 Total liabilities (add lines 17 through 23 and lines 30 and 31.	
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and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted	
ğ 24 Unrestricted	
25 Temporarily restricted	
26 Permanently restricted	
Foundations that do not follow SFAS 117, check here	
and complete lines 27 through 31.	4 540 0 050 500
27 Capital stock, trust principal, or current funds 2,951,743. 3,270,522.	
28 Paid-in or capital surplus, or land, bldg., and equipment fund	
29 Retained earnings, accumulated income, endowment, or other funds 0. 0. 0.	
30 Total net assets or fund balances 2,951,743. 3,270,522.	1,743. 3,270,322.
31 Total liabilities and net assets/fund balances 2,951,743. 3,270,522.	1 743 3 270 522
	2,743. 3,270,322.
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 30	
	Form 990-PF (2015)

See the Part VI instructions.

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

_		18 - 50	74U8U	ıctio	Page 4			
		140 - 56	e msu c	ICTIO	13)			
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	ł						
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			1,2				
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► X and enter 1%							
	of Part I, line 27b	ł						
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	l						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			<u>0.</u>			
3	Add lines 1 and 2	3		1,2				
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		1,2	68.			
6	Credits/Payments:	Ì						
a	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 1,684.							
	Exempt foreign organizations - tax withheld at source							
	Tax paid with application for extension of time to file (Form 8868)							
	Backup withholding erroneously withheld 6d 6d							
	Total credits and payments. Add lines 6a through 6d	7		1,6	84.			
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8						
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9						
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		4	16.			
	Enter the amount of line 10 to be: Credited to 2016 estimated tax	11			0.			
	rt VII-A Statements Regarding Activities			-	<u> </u>			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	<u> </u>		Yes	No			
10		•	1a		X			
_	any political campaign?)	1b	_	X			
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?		10					
	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.								
c Did the foundation file Form 1120-POL for this year?								
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:								
	(1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$ 0.							
e	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	-	<u>X</u>			
	If "Yes," attach a detailed description of the activities.		Į	1				
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								
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?								
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?		5	L	X			
	If "Yes," attach the statement required by General Instruction T.		ľ					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:							
	By language in the governing instrument, or		ľ	ľ				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state legislation.	aw	l					
	remain in the governing instrument?		6	Х				
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				
82	Enter the states to which the foundation reports or with which it is registered (see instructions)							
	GA		_ .					
ŀ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		_ '					
٠	of each state as required by General Instruction G? If "No," attach explanation		8b	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 calen-	dar	75		 			
9	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV	uul	9		y			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10		X			
	and any paragraph and any paragraph and the state of the		1 10	1				

		L474080		Page 5
Pa	rt VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges	?		
	If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ► WAYNE DEITRICH Telephone no. ► 404	1-427-8	686	
	Located at ► 102 LIMEKILN DRIVE, NEENAH, WI ZIP+4	<u> 54956</u>	- <u>42</u>	<u>74</u>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			· 🔲
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A_	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		Yes	
	securities, or other financial account in a foreign country?	16	L	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required		r	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	No		
	(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?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	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)?	. No		
	(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	1		
	termination of government service, if terminating within 90 days.)	ı No		
b	o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	,_		
		/A 1b		
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2015?	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)):			
â	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015?	اسا		
		NO		
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)	/A 2b		
	statement - see instructions.) If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	70		
(
٠.	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
3		l No		
	during the year? L Yes LX_ b If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after	, 110		
	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,			
		/A 3b		
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	 	X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	70		
	had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		x
	nac net cook sometion hopen ay bolose and mot day of the day for the organism g in costs.	Form QQ	n_DE	

4b X Form **990-PF** (2015)

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: (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes X No	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	
(1) 22.7) 2.7 (2.7)	
$1 \qquad \qquad 1$	
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,	
any voter registration drive?	
(3) Provide a grant to an individual for travel, study, or other similar purposes?	
(4) Provide a grant to an organization other than a charitable, etc., organization described in section	
4945(d)(4)(A)? (see instructions)	
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for	İ
the prevention of cruelty to children or animals?	- 1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations	
section 53.4945 or in a current notice regarding disaster assistance (see instructions)? N/A 5b	
Organizations relying on a current notice regarding disaster assistance check here	
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? N/A Yes No	
If "Yes," attach the statement required by Regulations section 53 4945-5(d).	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on	
a personal benefit contract?	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	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 shelter transaction? Yes X No	
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? N/A 7b	
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly	
Paid Employees, and Contractors	
List all officers, directors, trustees, foundation managers and their compensation.	
(a) Name and address (b) Title, and average hours per week devoted (lf not paid, and deterred according to the control of the	e) Expense count, other llowances
(a) Name and address nours per week devoted (If not paid, and deferred address to position enter -0-) compensation al	lowances
AYNE DEITRICH CEO	
02 LIMEKILN DRIVE	
JEENAH, WI 54956 0.00 0. 0.	0.
UZANNE DEITRICH SECRETARY	
02 LIMEKILN DRIVE	
NEENAH, WI 54956 0.00 0. 0.	0.
Compensation of five highest-paid employees (other than those included 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 hours per week (c) Compensation and deterred account of the compensation of the compensation (c) Compensation	Expense count, other
(a) Name and address of each employee paid more than \$50,000 hours per week devoted to position (c) Compensation employee benefit plans accompensation devoted to position	llowances
NONE	
Total number of other employees paid over \$50,000	

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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	(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.	Expenses
1N/A	\dashv
2	
3	
4	_
	_
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 <u>N/A</u>	_
	\dashv
^	-
2	\dashv
All other program-related investments. See instructions.	
3	
·	\dashv
	\neg
Total, Add lines 1 through 3	• 0
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P	Minimum Investment Return (All domestic foundations me	oust co	mplete this pa	art. Foreign four	ndations, s	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable	e, etc r	urposes:			
	Average monthly fair market value of securities	-,, [F		1a	3,905,758.
	Average of monthly cash balances				1b	282,128.
	Fair market value of all other assets				1c	
d	Total (add lines 1a, b, and c)				1d	4,187,886.
е	Reduction claimed for blockage or other factors reported on lines 1a and					
	· · · · · · · · · · · · · · · · · · ·	1e		0.	Ì	
2	Acquisition indebtedness applicable to line 1 assets				2	0.
3	Subtract line 2 from line 1d				3	4,187,886.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount,	see ins	tructions)		4	62,818.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on	Part V,	line 4		5	4,125,068.
6	Minimum investment return. Enter 5% of line 5	_			6	206,253.
P	foreign organizations check here and do not complete this part.)		private operatii	ig foundations an	d certain	
1	Minimum investment return from Part X, line 6				1	206,253.
	· 1	2a		1,268.		
b		2b				
_	Add lines 2a and 2b		···········		2c	1,268.
3	Distributable amount before adjustments. Subtract line 2c from line 1				3	204,985.
4	Recoveries of amounts treated as qualifying distributions				4	0.
5	Add lines 3 and 4				5	204,985.
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	204,985.
P	Qualifying Distributions (see instructions)					
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purp	oses:				105 000
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26				1a	195,000.
b	Program-related investments - total from Part IX-B				1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable	ile, etc.,	purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the:				_	
а	Suitability test (prior IRS approval required)				3a	
þ	Cash distribution test (attach the required schedule)				3b	107 000
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and		(III, line 4		4	195,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net inves	stment				
	income. Enter 1% of Part I, line 27b				5	1,268.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			1	6	193,732.
	Note. The amount on line 6 will be used in Part V. column (b), in subsequent years with	hen cal	culating whethe	r the foundation o	malifies for t	the section

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI,				204,985.
line 7				204,303.
2 Undistributed income, if any, as of the end of 2015			194,837.	
a Enter amount for 2014 only			194,037.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2015:				
a From 2010				
b From 2011				
c From 2012				
d From 2013			'	
e From 2014				
f Total of lines 3a through e	o.			
4 Qualifying distributions for 2015 from				
Part XII, line 4: ► \$ 195,000.				
a Applied to 2014, but not more than line 2a			194,837.	
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 2015 distributable amount				163.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2015	0.			0.
(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	0.			
b Prior years' undistributed income. Subtract			İ	
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 2014. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2016				204,822.
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 2010				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2016.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2011				
b Excess from 2012				
c Excess from 2013				
d Excess from 2014			1	
e Excess from 2015				
	<u>"</u>			Form 990-PF (2015)

	H FAMILY FO				74080 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 fo	•		. ▶ └	1.0.000.00	
b Check box to indicate whether the found		ig foundation described i		4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(5) 0014	Prior 3 years	(4) 0040	(-) 7-4-1
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(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				<u> </u>	<u></u>
d Amounts included in line 2c not			ļ		1
used directly for active conduct of	1				
exempt activities					
e Qualifying distributions made directly			}		
for active conduct of exempt activities.					
Subtract line 2d from line 2c		<u></u>			
3 Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter:					
(1) Value of all assets		<u> </u>]		
(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			1		
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		to this next only	if the foundation	had \$5 000 as ma	
Part XV Supplementary Info			ii tile lounuation	i nau po,000 or me	ore in assets
		uctions.,			
1 Information Regarding Foundation	_				
 a List any managers of the foundation whyear (but only if they have contributed in the contribu			ributions received by the	e foundation before the clos	se of any tax
	nore man 40,000). (See s	6011011 307 (d)(2).)			
WAYNE DEITRICH					
 b List any managers of the foundation who other entity) of which the foundation had 			(or an equally large porti	on of the ownership of a pa	artnership or
••	Sa 10 % OF Greater lineres	ol.			
NONE			_ 		
2 Information Regarding Contribut					
Check here ► X if the foundation of the foundation makes gifts, grants, etc.					
					
a The name, address, and telephone num	iper or e-mail address of t	ne person to wnom appli	cauons should be addre	ssed:	
		,	•		
h. The form in which applications should be	no outhwitted and informat	tion and materials they sh	acild include:		
b The form in which applications should be	Je Subinitieu and Ilhuifildi	non and materials they Si	iodia incidat.		
c Any submission deadlines:					
d Any restrictions or limitations on award	s. such as hy deographic	al areas, charitable fields	kinds of institutions or	other factors:	
a rang room loading or initiations on award	o, saun as by goograpino	ar ar out, orier nutric noites,	oo or mondulono, ur	on accord.	

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3 Grants and Contributions Paid During the Ye	ear or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Contribution	, , , , , , , , , , , , , , , , , , , ,
a Paid during the year				
HILLSDALE COLLEGE		501(C)(3)	CHARITABLE	
33 E. COLLEGE STREET HILLSDALE, MI 49242	ļ			75,000.
ALLICOUALE, MI 49242				
LAWRENCE UNIVERSITY		501(C)(3)	CHARITABLE	
711 E. BOLDT WAY		501(0)(3)		
APPLETON, WI 54911				100,000.
		}		
LURIE CHILDREN'S FOUNDATION		501(C)(3)	CHARITABLE	
225 E, CHICAGO AVE.				20.000
CHICAGO, IL 60611				20,000.
		}		
				1
	<u></u>	<u> </u>		195 000.
Total b Approved for future payment			34	195,000.
b , pproved to retain payment				
NONE				
		<u> </u>		
		1		
		1		
		 		
]
Total			▶ 3b	0.

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelated business income			ed by section 512, 513, or 514	(e)		
Zino gross amounts amous care massacrass	_ (a)	(b)	(C) Exclu-	(d)	Related or exempt		
1 Program service revenue:	Business code	Amount	sion	Amount	function income		
	- 0000		+				
a			╁┈╁				
ь			+ $+$				
C							
d			$\downarrow \downarrow \downarrow$				
e							
f							
g Fees and contracts from government agencies			1 1				
2 Membership dues and assessments							
3 Interest on savings and temporary cash							
investments			14	11.			
4 Dividends and interest from securities			14	73,269.			
			1	15,205.			
5 Net rental income or (loss) from real estate:	-		+				
a Debt-financed property			++				
b Not debt-financed property							
6 Net rental income or (loss) from personal							
property			1				
7 Other investment income							
8 Gain or (loss) from sales of assets other			7 1				
than inventory	1		14	104,102.			
9 Net income or (loss) from special events			1 - 1				
			1 1				
10 Gross profit or (loss) from sales of inventory			+ +				
11 Other revenue:			j l				
a			-				
b			-	-			
	1 1		1 1				
C							
					<u>,</u>		
de		0	•	177,382.	0.		
e 12 Subtotal. Add columns (b), (d), and (e)		0	•		0. 177,382.		
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)		0			0. 177,382.		
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)				13	0. 177,382.		
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)				13	0. 177,382.		
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities 1	to the Acco	omplishment of E	xempt	13	177,382.		
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities 1 Line No. Explain below how each activity for which incompared to the second sec	to the Acco	omplishment of E	xempt	13	177,382.		
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities 1	to the Acco	omplishment of E	xempt	13	177,382.		
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities 1 Line No. Explain below how each activity for which incompared to the second sec	to the Acco	omplishment of E	xempt	13	177,382.		
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities 1 Line No. Explain below how each activity for which incompared to the second sec	to the Acco	omplishment of E	xempt	13	177,382.		
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities 1 Line No. Explain below how each activity for which incompared to the second sec	to the Acco	omplishment of E	xempt	13	177,382.		
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities 1 Line No. Explain below how each activity for which incompared to the second sec	to the Acco	omplishment of E	xempt	13	177,382.		
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities 1 Line No. Explain below how each activity for which incompared to the second sec	to the Acco	omplishment of E	xempt	13	177,382.		
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities 1 Line No. Explain below how each activity for which incompared to the second sec	to the Acco	omplishment of E	xempt	13	177,382.		
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		Exempt Organi	izations							
1	Did the or	ion 501(c) of		Yes	No					
the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?										
а										
-	(1) Cash				,			1a(1)		X
	(2) Other							1a(2)		X
ь	Other tran							141-7		
U		s of assets to a noncharital	nla avamnt araanizat	ion				16(1)		X
								1b(2)		X
										X
	• •	bursement arrangements	oi other assets					1b(3) 1b(4)		X
	` '	•						1b(5)	\vdash	X
		s or loan guarantees	mharahin ar fundrais	cina caliaitatia	nc			1b(6)		X
		rmance of services or me						1c		X
		f facilities, equipment, ma				huava ahaw tha fair i	market value of the goods, a		Ll	
a							market value of the goods, o		5613,	
					O 1855 than fair market var	ue ili aliy ilalisaciloi	n or sharing arrangement, sh	IOW III		
۵۱.		d) the value of the goods,			evernt organization	(d) December	n of transfers, transcations, and s			
ajı	ine no.	(b) Amount involved	(c) Name of		exempt organization	(u) Description	n of transfers, transactions, and s	naring ar	rangeme	nis
				N/A						
										
			-							
										
					 					
								_		
2a	is the fou	indation directly or indirec	tly affiliated with, or i	related to, one	or more tax-exempt organ	uzations described		_		_
	ın sectior	1 501(c) of the Code (othe	r than section 501(c))(3)) or in sect	ion 527?		<u></u>	Yes	LX	No
b	If "Yes," o	omplete the following sch	edule.							
	,	(a) Name of org			(b) Type of organization		(c) Description of relationsh	IP.		
		N/A								
		·					_			
	Unde	er penalties of perjury, I declare	that I have examined the	ıs return, ıncludın	ig accompanying schedules and	d statements, and to the	best of my knowledge May	the IRS	discuss t	his
Si	ign and t	1	^ '. '	reparer (other thai	n taxpayer) is based on all infor	mation of which prepare	retur	n with th	e prepar (see ins	er
	ere	horne H.	Dutul		5/12/2016	CEO		Yes		No
	Sig	nature of officer or trustee)		Date	Title				
_		Print/Type preparer's na		Preparer's s	ignature	Date	Check if PTIN			
				INI	1mi	1.1	self- employed			
Paid JOSEPH R. SPRA			SPRADLIN	JOSEPH	R. SPRADLI	5/10/14	P00	363	594	
P	reparer	Firm's name ► MCE					Firm's EIN ▶ 20-36			
U	se Only	·								
			99 POWERS	FERRY	ROAD, SUITE	E 450				
		•	LANTA, GA			-	Phone no. 770-87	4-1	691	
				 					0-PF	(2015)

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

Name of the organization

Employer identification number

DE	EITRICH FAMILY FOUNDATION, INC	27-147 <u>4</u> 08 <u>0</u>
Organization type (check o		
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	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
Note. Only a section 501(c) General Rule X For an organization	s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor	ş \$5,000 or more (ın money or
Special Rules		
sections 509(a)(1) any one contribute	in described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount, line 1. Complete Parts I and II.	or 16b, and that received from
year, total contribu	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from autions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educ cruelty to children or animals. Complete Parts I, II, and III.	
year, contributions is checked, enter purpose. Do not c	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a exclusively for religious, charitable, etc., purposes, but no such contributions totaled makere the total contributions that were received during the year for an exclusively religious complete any of the parts unless the General Rule applies to this organization because if le, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000 If this box , charitable, etc.,
but it must answer "No" or	that is not covered by the General Rule and/or the Special Rules does not file Schedule En Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Fort the filing requirements of 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) (2015)

Name of organization

Employer identification number

DEITRICH F	AMILY	FOUNDATION,	INC
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27-1474080

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional additional copies of Part I if additional copi	itional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	WAYNE DEITRICH 102 LIMEKILN DRIVE NEENAH, WI 54956	\$325,000. 	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Oncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Oncash 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 Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

DEITRICH FAMILY FOUNDATION, INC

27-1474080

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	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	
			<u> </u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
				
	3-15	Sehadula B (Farm)	990. 990-EZ. or 990-PF) (

FORM 990-PF INTERES	T ON SAVIN	GS AN	ID TEMPO	RARY	CASH	IN	/ESTMENTS	ST	ATEMENT	1
SOURCE			(A) REVENUE PER BOOKS		NET	IN	(B) /ESTMENT COME		(C) ADJUSTED ET INCOM	E
MORGAN STANLEY 11699 MORGAN STANLEY 11700				6. 5.			6. 5.			
TOTAL TO PART I, LIN	IE 3			11.			11.			
FORM 990-PF	DIVIDENDS	AND	INTERES	ST FRO	OM SEC	CUR	ITIES	ST	ATEMENT	2
SOURCE	GROSS AMOUNT	(APITAL SAINS VIDENDS		(A) EVENUI R BOOI		(B) NET INVES MENT INCO		(C) ADJUSTI NET INCO	
MORGAN STANLEY 116214-744 MORGAN STANLEY	10.		0	•		LO.	1	LO.		
116994-744 MORGAN STANLEY	19,971.		0	•	19,9	71.	19,97	71.		
117000-744	45,163.		0	•	45,16	53.	45,16	53.		
MORGAN STANLEY 117624-744	2,972.		0	•	2,9	72.	2,97	72.		
SKYBRIDGE MUL-ADSVR SER G	5,153.		0	•	5,1	53.	5,15	53.		
TO PART I, LINE 4	73,269.		0		73,2	59.	73,26	59.		
FORM 990-PF			LEGAL 1	FEES				ST	ATEMENT	3
DESCRIPTION		EXPE		NET I	B) NVEST		(C) ADJUSTEI NET INCOI		(D) CHARITA PURPOS	
OTHER PROFESSIONAL	FEES		110.		11	0.				0.
TO FM 990-PF, PG 1,	LN 16A		110.		11	0.				0.

FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING FEES	1,850.	1,850.		0.	
TO FORM 990-PF, PG 1, LN 16B	1,850.	1,850.		0.	
FORM 990-PF C	THER PROFES	SIONAL FEES	S'	ratement 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES	
INVEST MGMT FEES-#116214-744 INVEST. MGMT.	46,697.	46,697.		0.	
FEES-#117000-744	103.	103.		0.	
INVEST MGMT FEES-#116994-744	8.	8.		0.	
TO FORM 990-PF, PG 1, LN 16C	46,808.	46,808.		0.	
FORM 990-PF	TAXES		STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS	NET INVEST-	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FOREIGN TAX EXPENSE 116994-744 FOREIGN TAX EXPENSE	16.	16.		0.	
117000-744 LESS SECTION 4940 REFUND	1,761. -1,027.			0. 0.	
TO FORM 990-PF, PG 1, LN 18	750.	1,777.		0.	

FORM 990-PF CORPORATE	STOCK	STATEMENT	7
DESCRIPTION	BOOK VALUE	FAIR MARKET	Г
SEE ATTACHED MS #124931-744 SEE ATTACHED MS #117624-744 SEE ATTACHED MS #117000-744 SEE ATTACHED MS #116994-744	230,259. 187,545. 1,308,459. 1,178,942.	252,64 190,79 1,536,83 1,952,73	99. 28.
FOTAL TO FORM 990-PF, PART II, LINE 10B	2,905,205.	3,932,98	87.