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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

2015

Department of the Treasury Internal Revenue Service ▶ 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

Open to Public Inspection

For calendar year 2015 or tax year beginning				, 2015, and ending , 20				
-			oundation	,			identification number	·-····
			AM & SANDY HEITZ FAMILY FOUND			39-1799		
-		-	and street (or P O box number if mail is not delivered to street address)	-	Room/suite		humber (see instructions)	
			•		rtoon//saite	(262) 37	•	
-			N HADDONSTONE PLACE wn, state or province, country, and ZIP or foreign postal code			<u> </u>		
		•				C If exempti	on application is pending,	check here
-			N, WI 53092 all that apply Initial return Initial return o	of a former public cl	harity	D 1 Foreign	n organizations, check here	
•	<i>3</i> C	JIIECK 6	Final return Amended ret	•	ilality	D I roleigi	i organizations, check nen	
			Address change Name change				n organizations meeting thi	
-		Shook t				check !	nere and attach computation	on
		1		axable private found	dation		foundation status was term 07(b)(1)(A), check here	
-			on 4947(a)(1) nonexempt charitable trust Other to Other t	X Cash	Accrual	Section 30	(b)(1)(A), check here .	
'			l —	A Casii	Accidai	I	idation is in a 60-month ter	i i
				on each basis \		under sec	tion 507(b)(1)(B), check he	ile •
Г		ne 16) I rt I	Analysis of Revenue and Expenses (The total of	on cash basis)				(4) 5
L	Га		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and	(b) Ne	t investment	(c) Adjusted net	(d) Disbursements for charitable
			the amounts in column (a) (see instructions))	expenses per books		ncome	income	purposes (cash basis only)
-	_							(cash basis only)
2018		1	Contributions, gifts, grants, etc , received (attach schedule)					
20		2	Check ► X if the foundation is not required to attach Sch B			F.0		
<u></u>		3	Interest on savings and temporary cash investments	67.0	58	58		
EV.		4	Dividends and interest from securities	67,9	770	67,970	67,970	
>_		5a	Gross rents					
ΝΆΥ		b	Net rental income or (loss)					
, ,	ne	6a	Net gain or (loss) from sale of assets not on line 10	3,6	84			
- }	eu	ь	Gross sales price for all assets on line 6a 311,756		-			
世名でつめ	Revenue	7	Capital gain net income (from Part IV, line 2)			3,684		
73	LE.	8	Net short-term capital gain					
100		9	Income modifications					
Ó	£	10a	Gross sales less returns and allowances					
		b	Less Cost of goods sold					
	•	C	Gross profit or (loss) (attach schedule)				1 200	-
	-	11	Other income (attach schedule) STM106	1,3		1,306	-	
-		12	Total Add lines 1 through 11	73,0	119	73,018	69,334	
		13	Compensation of officers, directors, trustees, etc					·····
	ses	14	Other employee salaries and wages					·····
	eü	15	Legal fees (attach schedule)					
	Х	16a	Accounting fees (attach schedule)				!	
	Operating and Administrative Expenses	ь	Other professional fees (attach schedule)					
	Ĭį	17	Interest					<u> </u>
	štra	17 18	Taxes (attach schedule) (see instructions)					
	ij	19	Depreciation (attach schedule) and depletion					
	Ē	20	Occupancy	1				
	Ĭ		Travel, conferences, and meetings		TIE W	EIVE		
	pu	21	Printing and publications		2	4 0 6516	8	
	Ď.	23	Other expenses (attach schedule)		≨∥ MAY	<u>1 5 2016</u>		
	tin	24	Total operating and administrative expenses.		<u> </u>		700	
	era	24	Add lines 13 through 23			雅N, UT		0
	О	25	Contributions, gifts, grants paid	91,8		· · · · ·	11	91,800
	-	26	Total expenses and disbursements. Add lines 24 and 25 .	91,8		0		91,800
-	_	27	Subtract line 26 from line 12	91,8				31,000
			Excess of revenue over expenses and disbursements .	(18,7	782			
		a b	Net investment income (if negative, enter -0-)	(10,/	321	73,018		
		C	Adjusted net income (if negative, enter -0-)			,3,010	69,334	
_		1	Adjusted net moonie (ii negative, chief -0-)	<u> </u>			03,034	

Page 2

Pa	ırt II	Balance Sheets Attached schedules and amounts in the description column	Degining of year		
		should be for end-or-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	91,423	149,531	149,531
	3	Accounts receivable			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable			
		Less allowance for doubtful accounts >			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts ▶			
sts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
ä	10a	Investments - U S and state government obligations (attach schedule)			
	b	Investments - corporate stock (attach schedule) STM137	1,249,691	1,351,198	1,351,198
	Į.	Investments - corporate bonds (attach schedule) STM138	1,274,490	1,035,638	1,035,638
	11	Investments - land, buildings, and equipment basis			
	' '	Less accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule)			-
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe >			
	16	Total assets (to be completed by all filers - see the			
	''	Instructions Also, see page 1, item I)	2,615,604	2,536,367	2,536,367
	17	Accounts payable and accrued expenses	270237001	2/330/30/	2/330/307
ý	18	Grants payable			-
	1	Deferred revenue			-
iţi	19	Loans from officers, directors, trustees, and other disqualified persons			-
Liabilities	20	Mortgages and other notes payable (attach schedule)			-
Ľ.	21	· · · · · · · · · · · · · · · · ·			
	22	Other liabilities (describe >)			-
	23_	Total liabilities (add lines 17 through 22)	0	0	-
		Foundations that follow SFAS 117, check here ▶ X and complete lines 24 through 26 and lines 30 and 31.			
Ses	24	-	2 615 604	2 526 267	
lances	24	Unrestricted	2,615,604	2,536,367	-
Bal	25	Temporarily restricted			1
В	26	Permanently restricted			1
Fund		Foundations that do not follow SFAS 117, check here			
o.		and complete lines 27 through 31			
	27	Capital stock, trust principal, or current funds			-
et Assets	28	Paid-in or capital surplus, or land, bldg, and equipment fund			-
As	29	Retained earnings, accumulated income, endowment, or other funds	0 645 604	0.506.065	-
et	30	Total net assets or fund balances (see instructions)	2,615,604	2,536,367	-
ž	31	Total liabilities and net assets/fund balances (see			
_		instructions)	2,615,604	2,536,367	<u> </u>
-	art II				
1		I net assets or fund balances at beginning of year - Part II, column (a), line			
		of-year figure reported on prior year's return)			2,615,604
		r amount from Part I, line 27a			(18,782)
		r increases not included in line 2 (itemize)			
		lines 1, 2, and 3			2,596,822
		reases not included in line 2 (itemize) STM116		5	60,455
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	2,536,367
EEA					Form 990-PF (2015)

Form 990-PF (2015) 39-1799844 Page 3 WILLIAM & SANDY HEITZ FAMILY FOUND Capital Gains and Losses for Tax on Investment Income Part IV (b) How acquired . (a) List and describe the kind(s) of property sold (e.g., real estate, (c) Date acquired (d) Date sold P-Purchase 2-story brick warehouse, or common stock, 200 shs MLC Co) (mo, day, yr) (mo, day, yr) D-Donation See STM134 1a b С d e (g) Cost or other basis (e) Gross sales price (f) Depreciation allowed (h) Gain or (loss) (or allowable) plus expense of sale (e) plus (f) minus (g) 308,072 3,684 а 311,756 b C d ρ Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col (h) gain minus of (k), but not less than -0-) or Losses (from col (h)) (k) Excess of col (i) (j) Adjusted basis as of 12/31/69 (I) F M V as of 12/31/69 over col (j), if any 3,684 а b C Ч е If gain, also enter in Part I, line 7 2 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 2 3,684 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income) If section 4940(d)(2) applies, leave this part blank Yes X No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part 1 Enter the appropriate amount in each column for each year, see the instructions before making any entries (c)
Net value of noncharitable-use assets Base period years Distributión ratio Adjusted qualifying distributions (col (b) divided by col (c)) Calendar year (or tax year beginning in) 2014 141,285 2,501,017 0.056491 2013 89,850 2,420,162 0.037126 2012 0.049682 124,120 2,498,306 2011 100,525 2,296,860 0.043766 2010 97,901 2,132,766 0.045903 0.232968 3 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 3 0.046594 4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5 4 2,544,151 5 118,542 6 Enter 1% of net investment income (1% of Part I, line 27b) . . . 6 730 7 7 Add lines 5 and 6 . . 119,272 8 Enter qualifying distributions from Part XII, line 4 91,800

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. See the

Part VI instructions

UIT	990-FF (2015) WILLIAM & SANDI REITZ FAMILI FOUND 39-17996	44		aye 4
Pa	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instru	ction	s)	
1a	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)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		1	,460
	here ▶ and enter 1% of Part I, line 27b			
С	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		1	<u>,460</u>
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		1	,460
6	Credits/Payments			
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a			
b	Exempt foreign organizations - tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		1	,460
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2016 estimated tax ► Refunded ► 11			
Pa	t VII-A Statements Regarding Activities	<u> </u>		,
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in 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)?	1 b		X
	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			
С	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 > \$ (2) On foundation managers > \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	}		
	on foundation managers \$	_		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
_	If "Yes," attach a detailed description of the activities	İ		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	_		٦,
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
þ	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		v
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
c	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			
6				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 law 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	7	X	
_	Enter the states to which the foundation reports or with which it is registered (see instructions)			
8a	WI			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
D	(or designate) of each state as required by General Instruction G? If "No," attach explanation STM152	8b		Х
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	UD		_^_
3	4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (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			1
. •	names and addresses	10		X
		1		

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Pai	rt VII-A Statements Regarding Activities (continued)	,	<u>,</u>	
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	X	
	Website address ► N/A			
14	The books are in care of ► STEPHANIE FLEMING Telephone no ► 262-3	77-3	970	
	Located at ► 10800 N HADDONSTONE PLACE, MEQUON, WI ZIP+4 ► 53092			
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 ▶ 15			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, secunties, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country			
Pai	rt 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.	<u> </u>	Yes	No
1a	Dunng the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	ļ		
	(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			1
	the benefit or use of a disqualified person)?		ļ	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		İ	
	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)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	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	<u> </u>	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))			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and			İ
	6e, Part XIII) for tax year(s) beginning before 2015?			
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			1
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			7.
	all years listed, answer "No" and attach statement - see instructions)	2b		X
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
_	<u> </u>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
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 May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the		1	
	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 2015)	3b	<u> </u>	17
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	ļ	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		X_

Form	990-PF (2015) WILLIAM & SANDY HEIT	Z FAM	ILY FOUND				39-1799	844	Page 6
Pai	t VII-B Statements Regarding Activitie	s for \	Which Forn	1 4720	May Be I	Require	d (continued)		
5a	Dunng the year did the foundation pay or incur any arr					-			
	(1) Carry on propaganda, or otherwise attempt to influ	ience le	gislation (section	on 4945((e))?	[Yes X No		
	(2) Influence the outcome of any specific public electi							1 1	
	directly or indirectly, any voter registration drive?					[Yes X No	1 1	
	(3) Provide a grant to an individual for travel, study, or	r other s	ımılar purposes	۶ ²		🗀	Yes X No		
	(4) Provide a grant to an organization other than a ch					L]	
						[Yes X No	1	
	(5) Provide for any purpose other than religious, chari								
	purposes, or for the prevention of cruelty to children					[Yes X No		
b	If any answer is "Yes" to 5a(1)-(5), did any of the trans						, L		
-	Regulations section 53 4945 or in a current notice reg							5b	
	Organizations relying on a current notice regarding dis	_						1	
_	If the answer is "Yes" to question 5a(4), does the foun								
·	because it maintained expenditure responsibility for th						Yes No		
	If "Yes," attach the statement required by Regulations] .65 [] .16		
6a	Did the foundation, during the year, receive any funds,			nav nre	milime				
Va	on a personal benefit contract?						Yes X No		
b	Did the foundation, during the year, pay premiums, dire						103 21 110	6b	X
	If "Yes" to 6b, file Form 8870	sony or i	indirectly, on a	personar	DOTICIN COM	act		0.5	
70	At any time during the tax year, was the foundation a p	arty to a	nrohibited tav	shelter t	transaction?		Yes X No		
	If "Yes," did the foundation receive any proceeds or ha							7b	
	t VIII Information About Officers, Dire								VAAS
Га	and Contractors	ctors,	musices,	Culia	ation ma	iageis,	inging raid	Lilipio	y cc3,
4 1	ist all officers, directors, trustees, foundation mana	aore an	d their compa	neation	/coo inetrue	tions)			
	ist all officers, directors, trustees, roundation mana		e, and average		mpensation		ontributions to	(a) Eve	
	(a) Name and address	` ´hou	rs per week	` (If n	ot paid,	employ	ee benefit plans		ense account, allowances
	DD WITH	PRESI	ed to position	en	iter -0-)	and delei	red compensation		
	DRA HEITZ L BAY COLONY DRIVE UNIT 903, 34108	FRESI	5.00		0		0		0
		TREAS							
		IKEMS	5.00		0		o		٥
	00 N HADDONSTONE PLACE, WI 53092	SECRE				<u></u>		·	0
		SECRE	5.00		0		o		0
530.	L W RIVER TRAIL DRIVE, WI 53092		5.00						0
				ŀ					
	Compensation of five highest-paid employees (other	than the	ose included (n line 1	- coo inctru	ctions) If	none enter	<u>'</u>	
	NONE."	LIKADI LIM	ose included () 	- 566 11150 0	ctions) ii	none, enter		
	NONE.		1		1		d) Contributions to		
	(a) Name and address of each employee paid more than \$50	000	(b) Title, and a		(c) Comper		employee benefit		ense account,
	(a) Marile and address of each employee paid more and, 400	,,,,,,	devoted to po		(c) Compe	F	plans and deferred compensation	other a	allowances
NON	7						<u></u>		
NON	2								
						- 			
					-				
						-			
	number of other ampleyage and over \$50,000		J		L				0
	number of other employees paid over \$50,000		<u> </u>		<u></u>			Form 90	0-PF (2015)
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Form	990-	PF	(201	5)

Form 990-PF (2015) WILLIAM & SANDY HEITZ FAMILY FOUND		1799844 Page 7
Part VIII Information About Officers, Directors, Trustees, Four	ndation Managers, Highly I	Paid Employees,
and Contractors (continued) 3 Five highest-paid independent contractors for professional services (see inst	ructions). If none, enter "NONE"	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Total number of others receiving over \$50,000 for professional services		
		<u></u>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant sta organizations and other beneficiaries served, conferences convened, research papers produced, e		f Expenses
1 CONTRIBUTIONS TO CHARITABLE ORGANIZATIONS		
2 GOVERNOUS TO EDVICE TOWN OR ON THE TOWN		87,500
2 CONTRIBUTIONS TO EDUCATIONAL ORGANIZATIONS		
		4,300
3		,
4		
Part IX-B Summary of Program-Related Investments (see Instr		
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2	Amount
1 NONE		
2	****	
All other program-related investments. See instructions		
3		
	···	
Total. Add lines 1 through 3	<u> </u>	F 000 BE (00) =
EEA		Form 990-PF (2015)

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes 1a 2,466,596 а 1b 116,298 Fair market value of all other assets (see instructions) 1c 0 1d 2,582,894 Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and 2 2 0 3 2,582,894 Cash deemed held for charitable activities
Enter 1 1/2% of line 3 (for greater amount, see instructions) 38,743 5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 2,544,151 127,208 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ and do not complete this part) 1 Minimum investment return from Part X, line 6 127,208 Tax on investment income for 2015 from Part VI, line 5 2a Income tax for 2015 (This does not include the tax from Part VI) 2b h 2¢ 1,460 Distributable amount before adjustments Subtract line 2c from line 1 3 3 125,748 4 Recoveries of amounts treated as qualifying distributions 4 Add lines 3 and 4 5 125,748 5 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, 7 125,748 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a 91,800 Program-related investments - total from Part IX-B 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., Amounts set aside for specific charitable projects that satisfy the 3 За 3b 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 91,800 5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions) Adjusted qualifying distributions. Subtract line 5 from line 4 6 91,800 Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

1	Distributable amount for 2015 from Part XI,	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
_	line 7				125,748
2	Undistributed income, if any, as of the end of 2015				
a	Enter amount for 2014 only				
b	Total for prior years,,				
3	Excess distributions carryover, if any, to 2015				
а	From 2010	_			
b	From 2011				
С	From 2012				
d	From 2013				
е	From 2014				
f	Total of lines 3a through e				
4	Qualifying distributions for 2015 from Part XII,				
	line 4 ▶ \$ 91,800				
а	Applied to 2014, but not more than line 2a				
	Applied to undistributed income of prior years				
_	(Election required - see instructions)				
	Treated as distributions out of corpus (Election				-
·	required - see instructions)				
	Applied to 2015 distributable amount		-		01 000
d	• •				91,800
_e	Remaining amount distributed out of corpus		_		-
5	Excess distributions carryover applied to 2015 .			–	
	(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:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5 .				
b	Prior years' undistributed income Subtract				
	line 4b from line 2b		_		
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
_	amount - see instructions				
е	Undistributed income for 2014 Subtract line				-
ŭ	4a from line 2a Taxable amount - see				
	Instructions				
£	Undistributed income for 2015 Subtract lines				
f					
	4d and 5 from line 1. This amount must be				
_	distributed in 2016				33,948
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)				
8	Excess distributions carryover from 2010 not		,		
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2016			·	
	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9				
а	Excess from 2011				
b	Excess from 2012	1			
c	Excess from 2013				
4	Excess from 2014				
	Excess from 2015	1			
-	EXCOSS HOLLIEUTO	l	1		I

Form 990-PF (2015)

Part	XIV Private Operating Foun	idations (see ins	tructions and Part	VII-A, question 9)		
1a	If the foundation has received a ruling or	determination letter th	at it is a private operat	ing		
	foundation, and the ruling is effective for 2	2015, enter the date of	f the ruling		▶	
b	Check box to indicate whether the foundation	ation is a private opera	iting foundation describ	ed in section	4942(j)(3) or 49	42(J)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years	<u> </u>	
	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	(4) 20.0	(0) 2011	(0) 2010	(4) 2012	· · · · · · · · · · · · · · · · · · ·
b	85% of line 2a					
				 		
С	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 .					
е	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					
а	"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					
С	"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		tion (Complete t	his part only if th	e foundation had	\$5.000 or more in	assets at
	any time during the year	•	•			
1	Information Regarding Foundation Ma					
a	List any managers of the foundation who		re than 2% of the total	contributions received	by the foundation	
	before the close of any tax year (but only					
	Sandra Heitz					
b	List any managers of the foundation who	own 10% or more of	the stock of a corpora	tion (or an equally large	e portion of the	
	ownership of a partnership or other entit				,	
2	Information Regarding Contribution, (Grant, Gift, Loan, Sch	olarship, etc , Progra	ims:		
	Check here ► If the foundation only	makes contributions	to preselected charital	ole organizations and d	oes not accept	
	unsolicited requests for funds. If the four			-		
	other conditions, complete items 2a, b, c	, and d				
а	The name, address, and telephone num	ber or e-mail address	of the person to whom	applications should be	addressed	
	20227					
	990APP					
þ	The form in which applications should be	e submitted and inform	iation and materials the	ey snould include		
	Any submission deadlines					
С	Any submission deadlines					
d	Any restrictions or limitations on awards,	such as by geograph	ical areas, charitable f	ields, kinds of institution	ns, or other	
	factors					

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year

Name and address (home or business) a Paid dumg the year CLEMSON UNIVERSITY FOUNDATION CLEMSON UNIVERSITY Clemson, SC 29634 NONE DOI: 10.00000000000000000000000000000000000	3 Grants and Contributions Paid During the Year or Approved for Future Payment							
Name and address (nome of Dusiness) Paid during the year CLEMSON UNIVERSITY Clemson, SC 29634 NONE LUKEMIA LYMPHOMA FOUNDATION 3 International Drive, Suite 200 Port Chester, NY 10573 NONE SUSAN G KOMMEN RACE FOR THE CURE 5005 LBJ FREEMAY Dallas, TX 75244 NONE MERICAN HEART ASSOCIATION 660 E MASON STREET Milwaukee, WI 53202 NONE FC RESEARCH WISCONSIN OVARIAN CANCER ALLIANCE 13825 W NATIONAL AVE SUITE 103 New Berlin, WI 53151 NONE PC RESEARCH MEDICAL COLLEGE OF WISCONSIN 8700 W WATERTOWN PLANK ROAD Milwaukee, WI 53226 NONE PC RESEARCH 7 ROSE HARMS LEGION POST 355 1540 13TH Avenue Grafton, WI 53024 NONE PC GENERAL FUND RESEARCH AND PO BOX 170284 Milwaukee, WI 53217 NONE PC EDUCATION RESEARCH RESEARCH RESEARCH RESEARCH RESEARCH RESEARCH RESEARCH AND PO BOX 170284 Milwaukee, WI 53217 NONE PC EDUCATION RESEARCH RESEARCH AND PO BOX 170284 Milwaukee, WI 53217 NONE PC EDUCATION	·	show any relationship to any foundation manager	status of		Amount			
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Milwaukee, WI 53217 NONE PC EDUCATION Total	KUBLY FOUNDATON							
Total	284			RESEARCH AND				
	WI 53217	NONE	PC	EDUCATION	5,000			
			<u> </u>					
				,				
Total				> 3b				

Part XV | Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation status of recipient Recipient Purpose of grant or contribution show any relationship to Amount any foundation manager Name and address (home or business) or substantial contributor a Paid during the year CENTER FOR DEAF BLIND PERSONS 3195 S SUPERIOR STREET Milwaukee, WI 53207 NONE PC EDUCATION 2,500 **VARIOUS** VARIOUA 2014 CHECKS NOT Milwaukee, WI 53202 NONE PC CASHED (1,700)**Total** 3a 91,800 Approved for future payment

Total

3b

Part XVI-A Analysis of Income-Producing	Z FAMILY E Activities				
nter gross amounts unless otherwise indicated	1	business income	Excluded by se	ection 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions
Program service revenue a	code				
b					
С					
d					
e					
f					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash investments .		58	14		
Dividends and interest from securities					
Net rental income or (loss) from real estate		_			
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal property					·
Other investment income					
3 Gain or (loss) from sales of assets other than inventory					
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory		·			
Other revenue a			-		
b					
)	
c	-				· · · · · · · · · · · · · · · · · · ·
c					
c e					
c d e Subtotal Add columns (b), (d), and (e)		58	3	13	
c d e Subtotal Add columns (b), (d), and (e)		58	3	13	
c d e 2 Subtotal Add columns (b), (d), and (e)					
c d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Explain below how each activity for which in	e Accompli	shment of Exe	empt Purpos	ses cributed importantly to t	
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c d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt p	e Accompli	shment of Exe	empt Purpos	ses cributed importantly to t	
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c d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt p	e Accompli	shment of Exe	empt Purpos	ses cributed importantly to t	
c d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt p	e Accompli	shment of Exe	empt Purpos	ses cributed importantly to t	
c d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt p	e Accompli	shment of Exe	empt Purpos	ses cributed importantly to t	

				HEITZ FAMILY		***		39-17998			ige 1.
Pa	rt X\			ansfers To and T	īransacti	ons and	d Relationship	With Nonc	harita	ble	
	D.4		rganizations	ge in any of the follow						Yes	NI-
1		-		on 501(c)(3) organiza	•					162	No
		anizations?	owe (other than secti	on so r(c)(s) organiza	tions) or in s	3600011 32	r, relating to politica	11			
а	-		ting foundation to a n	oncharitable exempt o	rganization	of					
<u> </u>			=		_				1a(1)		Х
									1a(2)		X
b	٠,	er transactions									
	(1)	Sales of assets to a	noncharitable exemp	t organization					1b(1)		Х
				exempt organization					1b(2)		Х
				sets					1b(3)		Х
	(4)	Reimbursement arra	ngements						1b(4)		Χ
	(5)	Loans or loan guarai	ntees						1b(5)		Χ
	(6)	Performance of serv	ices or membership o	or fundraising solicitation	ons				1b(6)		Х
С	Sha	iring of facilities, equi	pment, mailing lists, o	ther assets, or paid ei	mployees				1c		X
d	If the	e answer to any of th	e above is "Yes," con	nplete the following so	hedule Col	lumn (b) sh	nould always show t	he fair market			
	valu	e of the goods, other	r assets, or services g	given by the reporting	foundation	If the foun	dation received less	than fair marke	t		
	valu	e in any transaction	or sharing arrangeme	nt, show in column (d)) the value o	of the good	ls, other assets, or s	ervices received	1		
a) Lı	ne no	(b) Amount involved	(c) Name of none	charitable exempt organi	zation	(d) Desc	cription of transfers, tra	nsactions, and sha	aring arra	angeme	nts
					-			-			
							.				
				,							
											-
											-
2a		•	•	with, or related to, on than section 501(c)(3		•	organizations		☐ Ye	s X	No
b		es," complete the fol								,5 11	
		(a) Name of organ	nization	(b) Type of	organization		(c) D	escription of relation	nship		
											•
									_		
_	Į	Inder penalties of perjury, I	declare that I have examine	ed this return, including according taxpayer) is based on all i	mpanying sche	dules and star	tements, and to the best of	f my knowledge and	belief, it is	true,	
Sig	n	A A COMPLETE DECISION OF THE CONTROL		payer) is based on all i	mormation of w	Alich preparer	rias any knowledge	May the IF			ırn
Неі		STEPHANIE FI	EMING 70%			TREASUR	RER	with the pi	eparer sh	own belo	ow
		Signature of officer or the	ustee	Date		Title 1		(see inst)	' <u>[X</u>	Yes	No
		Print/Type prepar	rer's name	Preparet's signature	W X	NINI	Date	Check X if	PTIN		
Pai		DANIEL R	LINSLEY		<u>VZII 711 C</u>		05-11-2016	self-employed	20120	3102	
Pre	pa	rer Firm's name	► DANIEL R LI	INSLEY CPA			Firm's E	IN ►			

Use Only Firm's address ► 5109 N CUMBERLAND BLVD

414-322-5267

Phone no

Federal Supporting State	tements 2015 PG01
Name(s) as shown on return	FEIN
WILLIAM & SANDY HEITZ FAMILY FOUND	39-1799844
Form 990PF - Part III of Other Decreases School	
EXCISE TAX	1,982
BOOK LOSS ON SALE OF INVESTMENTS	11,509
LOSS ON MARKET VALUE OF INVESTMENTS	43,278
TAX GAIN ON SALE OF INVESTMENTS	3,686
Total	60,455

PG01

Form 990PF - Part VII-A - Line 8(b) Statement #152
Explanation of Non-Filing with Attorney General

FILING IS NOT REQUIRED IN WISCONSIN

		Federal Suppo	orting Statements	2015	PG01
Name(s) as shown on return				FEIN	
WILLIAM & SA	ANDY HEITZ	FAMILY FOUN)	3 :	9-1799844

Form 990PF - Part II - Line 10(b)
Investments: Corporate Stock Schedule

Statement #137

Category	воч	Book Value	EOY FMV
ALTRIA GROUP	64,051	75,673	75,673
AMERIGAS PARTNERSHIP	47,920	34,270	34,270
APPLE COMPUTER	353,216	336,832	336,832
BLUE RIBBON INCOME FUND	34,439	22,084	22,084
EXELON	12,978	9,720	9,720
FIRSTENERGY	27,293	22,211	22,211
JOHNSON AND JOHNSON	83,656	82,176	82,176
KRAFT FOODS	18,735	21,755	21,755
MERCK	48,272	44,897	44,897
MONDELEZ INTERNATIONAL	32,656	40,311	40,311
FUNDAMENTAL INVESTORS FUND	47,873	49,099	49,099
XCEL ENERGY	53,880	53,865	53,865
NOVARTIS	27,798	25,812	25,812
PHILIP MORRIS	105,885	114,283	114,283
SCANA CORP	30,200	30,245	30,245
SILVER BAY REALTY	2,418	2,286	2,286
TWO HARBORS	30,060	24,300	24,300
VENTAS	56,356	44,354	44,354
CARE CAPITAL PROPERTIES		5,992	5,992
EATON VANCE FLOATING RATE FUND	71,150		
WELLTOWER	37,835	52,723	52,723
RAYONIER	13,970	11,100	11,100
VERIZON	23,390	23,110	23,110
WASTE MANAGEMENT	25,660	26,685	26,685
DIEBOLD		18,054	18,054
EMERSON ELECTRIC		34,677	34,677
GLAXOSMITHKLINE		38,333	38,333
INTEL		41,340	41,340
NORTHWEST NATURAL GAS		25,306	25,306
PROCTOR AND GAMBLE		39,705	39,705
Totals	1,249,691	1,351,198	1,351,198

•	Federal Supporting Statements	2015 PG01
Name(s) as shown on return		FEIN
WILLIAM & SANDY HEITZ	FAMILY FOUND	39-1799844
Form 9	90PF - Part II - Line 10(c)	Statement #138

WILLIAM & SANDY HEITZ FAMILY F	OUND		39-1799844
Form 990PF - F Investments: Co	Part II - Line 3 prporate Bond So		Statement #138
Category	воу	Book Valı	ue EOY FMV
GOLDMAN SACHS BANK		75,0	75,057
GOLDMAN SACHS BANK	101,299	100,7	793 100,793
SALLIE MAE BANK	101,223	100,5	574 100,574
BMW BANK	140,371	140,4	114 140,414
GOLDMAN SACHS	75,487		
CAPITAL ONE BANK	70,454		
GE CAPITAL FINANCIAL	50,129		
GE CAPITAL FINANCIAL	51,864		
SALLIE MAE BANK	55,703	55,7	704 55,704
DISCOVER BANK	55,735	55,5	575 55,575
GE CAPITAL BANK	60,205		
FIRST FINANCIAL	50,922	50,1	146 50,146
DISCOVER BANK	76,501	75,4	193 75,493
DISCOVER BANK	51,097	50,3	320 50,320
GE CAPITAL FINANCIAL	50,913	50,4	194 50,494
GE CAPITAL FINANCIAL	41,807	40,9	979 40,979
GE MONEY BANK	91,685	91,1	102 91,102
GOLDMAN SACHS BANK	49,812	49,6	•
BANK OF NORTH CAROLINA	99,283	99,3	99,373
Totals	1,274,490	1,035,6	38 1,035,638

		Fodora	Supporting	deral Supporting Statements					
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Name(s) as shown on return							Your Socia	Your Social Security Number	ħ
WILLIAM & SANDY HEITZ FAMILY FOUND								39-1799844	4
	0000 mx00	1 out. 1 - T - T - T - T		- Other Income Schedule			Ū.	Statement #106~	106~
	11000 = 101	1 2 1 5 1					•		
	Revenue	Net	Adjusted	red					
Description	and expenses	ınvestment	net income	come					
AMERIGAS PARTNERSHIP INCOME	1,306	1,306		1,306					
Totals	1,306	1,306		1,306					
								PG01	
	Form 990-PF - Part IV		ins And Losses	- Capital Gains And Losses Information (Overflow)	erflow)		0,	Statement #134~	134~
	P-Purchase					Cost or		Gain	Gains Minus
Description	D-Donation	Date Acquired	Date Sold	Sales Price	Depreciation	other basis	Gain or Loss		Excess or Losses
CARE CAP PROPERTIES	Q.	02-11-1998	08-24-2015	17		6		80	80
KRAFT FOODS	Δι	04-01-1999	07-06-2015	8,721		3,788	4,933	133	4,933
CAPITAL ONE BANK	D4	02-21-2008	03-02-2015	70,000		70,000			
GE CAPITAL FINANCIAL	Δı	10-15-2008	10-23-2015	50,000		50,000			
GE CAPITAL FINANCIAL	ρ,	03-04-2011	03-11-2015	50,000		50,000			
GE CAPITAL BANK	Δ, (11-09-2012	11-23-2015	60,000		60,000			6
EATON VANCE PLOATING RATE FUND	Дı	03-01-2013	05-13-2015	73,018		74,275	(1,257)	157)	(1,257)
Total				311,756		Z/O ROS	ह के के कि कि के कि कि के कि कि कि के कि कि कि कि कि कि कि कि कि कि कि कि कि	4,000	48 d 7 1

Federal Supporting Statements

2015 PG01

Name(s) as shown on return

WILLIAM & SANDY HEITZ FAMILY FOUND

Your Social Security Number

39-1799844

Form 990PF - Part XV - Line 2
Application Submission Information

Grant Program GENERAL GRANTS

Applicant Name STEPHANIE FLEMING

Address 10800 N HADDONSTONE PLACE MEQUON, WI 53092

Telephone 262-377-3970

Email Address

Form & Content purpose of organization and request amount requested

Submission Deadline NONE

Restrictions on Award NONE