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

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Depar	tment	t of the Treasury				ecurity numbers				2010
Intern	al Rev	venue Service				2015		s is at www.rs ending	s.gov/form990pf. JUN 30, 2016	Open to Public Inspection
		dar year 2015 or tax year	beginning	JUL	Ι,	2015	, and	enang	1	
Nan	ne of	foundation							A Employer identification	1 number
1.0	3 TO	TORN DAWTIN		7 W T ○ NT					23-7400242)
		IGAN FAMILY			address)			Room/suite	B Telephone number	<u>i</u>
		•		1140 00 10 31 001	addiossj			Tioonisano	920.468.06	50
		7 NICOLET DR		D or former o	ontal and	do.				
-		own, state or province, coul EN BAY, WI	1111 y, allu 211 54311	P or toreign p	USIAI CU	ue			C If exemption application is p	bending, check here
-			Initial return	· ·		Initial return of	a former nublu	a abarıtı	D 1. Foreign organization	s chack hara
u c	HECK	======================================	Final return	!		Amended retur	-	Citatily	1. Toreign organization	s, clicck liefe
		=	Address cha	2000		Name change	11		Foreign organizations m check here and attach c	eeting the 85% test,
H (hack				emnt nr	rvate foundation	 		1	
<u>"</u>	_	ction 4947(a)(1) nonexemp		· · · · · · · · · · · · · · · · · · ·		xable private foi			E If private foundation sta under section 507(b)(1	
L F2		rket value of all assets at e		J Accounti		<u> </u>		crual	1	
		Part II, col (c), line 16)	ilu di yeai		her (spe		,	ci dai	F If the foundation is in a under section 507(b)(1	
-	\$	1 035	390	(Part I. colu	mn (d) i	must be on ca	sh basis.)		didei section sor(b)(1	/(D), check field
_	rt I			,) Revenue and		investment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in colun necessarily equal the amount	nns (b), (c), and	d (d) may not	exp	enses per book		icome	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants				20,000) .		N/A	(00011 20010 0111))
	2	Check If the foundation				20,000	-		11,722	
	3	Interest on savings and tempor	•							
	4	Dividends and interest from	m securities	:		46,752	2.	46,752.		STATEMENT 1
	•	Gross rents	0000	•		<u> </u>				
_		Net gain or (loss) from sale of a	ssets not on I	ine 10		-19,313	3.			
Ę	b	Gross sales price for all assets on line 6a		,908.						
Revenue	7	Capital gain net income (from F						0.		
æ	8	Net short-term capital gair	1							
	9	Income modifications								
	10a	Gross sales less returns and allowances								
	b	Less Cost of goods sold								
	С	Gross profit or (loss)								
	11	Other income								
	12	Total. Add lines 1 through	h 11			47,439	9.	46,752.		770
	13	Compensation of officers, direct	ctors, trustees	s, etc		().	0.	RECEIV	
	14	Other employee salaries a	nd wages							I I I I
40	15	Pension plans, employee	benefits						IR GEP 197	ANS IX
še		Legal fees							8	13
<u>8</u>	b	Accounting fees	ST	MT 2		4,10	0.	4,100.		1000 0.
ŭ	C	Other professional fees								,,
Operating and Administrative Expenses	17	Interest					_			ļ <u> </u>
it a	18	Taxes		MT 3		44	٠.	0.		0.
inis	19	Depreciation and depletion	n							
Ę	20	Occupancy			<u> </u>	2	_			
Þ	21	Travel, conferences, and r	meetings			3,65	1 •	0.		3,654.
ă	22	Printing and publications				~ ~ ~	_			
ing	23	Other expenses		MT 4		31	J •	310.	-	0.
¥rat	24	Total operating and admi				0 51	,	A 410		2 (54
ď		expenses. Add lines 13 th	_			8,51		4,410.		3,654.
_	25	Contributions, gifts, grant	-			_59,04	94 •		ļ	59,044.
	26	Total expenses and disbu	ursements.			67 EE.	ا ء	A 410		60.000
		Add lines 24 and 25	10.		 	67,55	9 •	4,410.		62,698.
	27	Subtract line 26 from line				_20 11	,			
	l	Excess of revenue over expens				-20,11	' • 	42,342.		
		Net investment income (if ne Adjusted net income (if ne						<u> </u>	N/A	
	ن	Valuated liet illenille (il ue	Meriad's	 /					1/4	

523501 11-24-15 LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2015)

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5 Decreases not included in line 2 (itemize)

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

5

Form **990-PF** (2015)

	Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		(col. (b) divided by col. (c))
_	2014	49,351.	991,037.		.049797
	2013	52,445.	935,141.		.056082
	2012	46,313.	934,728.		.049547
	2011	32,508.	858,039.		.037886
	2010	40,536.	810,594.		.050008
2	Total of line 1, column (d) Average distribution ratio for the 5-year base	se period - divide the total on line 2 by 5.	or by the number of years	2	.243320
3	the foundation has been in existence if less		or by the number of yours	3_	.048664
4	Enter the net value of noncharitable-use as	sets for 2015 from Part X, line 5		4	944,862.
5	Multiply line 4 by line 3	•		5	45,981.
6	Enter 1% of net investment income (1% of	Part I, line 27b)		6	423.
7	Add lines 5 and 6			7	46,404.
8	Enter qualifying distributions from Part XII	, line 4		8	62,698.
	If line 8 is equal to or greater than line 7, cl	heck the box in Part VI, line 1b, and comp	olete that part using a 1% tax rate.		

See the Part VI instructions.

Part IV

1a

b C d e

a b C d

e

b C d

e

	n 990-PF (2015) MADIGAN FAMILY FOUNDATION		<u>74002</u>			Page 4
	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	<u> 4948 -</u>	see in	stru	ction	1S)
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 here 🕨 🗶 and enter 1%	1			4	<u>23.</u>
	of Part I, line 27b					
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
	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			4	<u>23.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				<u>0.</u> 23.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			4	<u>23.</u>
6	Credits/Payments:					
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 480	<u>.</u>				
b	Exempt foreign organizations - tax withheld at source 6b	4				
C	: Tax paid with application for extension of time to file (Form 8868)					
	I Backup withholding erroneously withheld					
7	Total credits and payments. Add lines 6a through 6d	7			4	<u>80.</u>
8	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				<u>57.</u>
	Enter the amount of line 10 to be: Credited to 2016 estimated tax	11				<u>0.</u>
	art VII-A Statements Regarding Activities		———		V	.
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interve	ne in	_		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 of	•	-	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				
	distributed by the foundation in connection with the activities.		:			
	Did the foundation file Form 1120-POL for this year?		-	1c		X
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					ĺ
_	(1) On the foundation. \blacktriangleright \$ 0. (2) On foundation managers. \blacktriangleright \$ 0	•				1
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					1
•	managers. • \$ 0 .					77
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		-	2		X
•	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	0.5	ľ			
J	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	, UI		3		X
42	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	olf "Yes," has it filed a tax return on Form 990-T for this year?	N	/ <u>a</u>	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	-17	** -	5		х
•	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					1
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the st	ite 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	(V		7	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					ĺ
	WI					ĺ
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation SEE STATE	MENT	10	8b		<u>x</u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for c	alendar				
	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV		L	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

Pa	rt VII-A Statements Regarding Activities (continued)			
		1	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_		<u> X</u>
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		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A		<u> </u>	
14	The books are in care of ► JAMES E. MADIGAN Located at ► 2627 NICOLET DRIVE, GREEN BAY, WI Telephone no. ► 920.46			
45		* 2 T T	_	П
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.	i/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	No
10	securities, 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			
Pa	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.		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?			
	(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?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available		İ	
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.) Yes X No			
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)? N/A	1b	1	
_	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?	10		х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	10		
-	defined in section 4942(j)(3) or 4942(j)(5)):			
8	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? Yes X No			
	If "Yes," list the years			
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b	ļ	<u> </u>
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	>		İ	
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
t	of "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 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.) N/A	96		
4.	Form 4720, to determine if the foundation had excess business holdings in 2015.) N/A Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	3b 4a	 	X
	o 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
		orm 99	0-PF	

Part VII-B Statements Regarding Activities for Which		Doguirod (<u> 23-74002</u>	44	Page 6
	n Form 4720 May be i	nequired (contin	uea)	1	
5a During the year did the foundation pay or incur any amount to:	1 4045(-))0		(T2)		
(1) Carry on propaganda, or otherwise attempt to influence legislation (sec	• • • •		es X No		
(2) Influence the outcome of any specific public election (see section 4955); 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 purpos		Ye	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	ation described in section				
4945(d)(4)(A)? (see instructions)			es X No		
(5) Provide for any purpose other than religious, charitable, scientific, litera	ary, or educational purposes, or				
the prevention of cruelty to children or animals?			es 🗶 No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify		ın Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see ins	•		N/A	5b	
Organizations relying on a current notice regarding disaster assistance chec					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption		_			
expenditure responsibility for the grant?		I/A L Y	es L No		
If "Yes," attach the statement required by Regulations section 53.4	• •				
6a Did the foundation, during the year, receive any funds, directly or indirectly,	to pay premiums on	.			
a personal benefit contract?		Ye	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on	a personal benefit contract?		L	6b	<u> </u>
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited to		Ye	es X No _		
b If "Yes," did the foundation receive any proceeds or have any net income att				7b	
Part VIII Information About Officers, Directors, Tru Paid Employees, and Contractors	stees, Foundation Ma	inagers, Highly	/		
List all officers, directors, trustees, foundation managers and the	eir compensation			-	
The can emotion and according to a control of the canada and and a control of the canada and a control of the cana	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(9)	Fynense
(a) Name and address	hours per week devoted	(If not paid,	i and deletted	acco	Expense unt, other
JAMES E. MADIGAN	to position TRUSTEE	enter -0-)	compensation	allu	wances
2627 NICOLET DRIVE	TROSTEE				
GREEN BAY, WI 54311	5.00	0.	0.		0.
CYTHIA MADIGAN BELL	TRUSTEE		•		
540 WESLEY STREET					
GREEN BAY, WI 54302	5.00	0.	0.		0.
DANIEL P. MADIGAN	TRUSTEE	<u> </u>	- 0.		
804 S MADISON					
GREEN BAY, WI 54302	2.00	0.	0.		0.
DAVID P. MADIGAN	TRUSTEE		•		
2739 E SHORE DRIVE					
GREEN BAY, WI 54302	2.00	0.	0.		0.
2 Compensation of five highest-paid employees (other than those					<u> </u>
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(-) Company	(d) Contributions to employee benefit plans and deferred	(e)	Expense unt, other
(a) Name and address of each employee paid more than \$50,000	devoted to position	(c) Compensation	and deferred compensation	acco	uni, other wances
NONE					
					<u>_</u>
				ļ .	
	_				
	_				
				ļ	
Table number of other employees and ever \$50,000		L			
Total number of other employees paid over \$50,000			<u> </u>		0

orm 990-PF (2015) MADIGAN FAMILY FOUNDATION	23-7	7400242 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundar Paid Employees, and Contractors (continued)		
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		
otal number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		▶ 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statist number of organizations and other beneficiaries served, conferences convened, research papers prod	ical information such as the uced, etc.	Expenses
OFFICER ON BOARDS OF CHARITABLE ORGANIZATION CONFERENCE AND MEETING EXPENSES FOR SERRA IN EQUESTRIAN ORDER OF THE HOLY SEPULCHRE OF JE	TERNATIONAL AND	3,654.
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
N/A		•
		0.
All other program-related investments. See instructions.		
Fatal Add lines 1 through 3	•	0.

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: 873,418. 1a a Average monthly fair market value of securities 85,833. 1b Average of monthly cash balances 1c c Fair market value of all other assets 959,251. 1d d Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and 0. 1e 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 2 959, 251. 3 3 Subtract line 2 from line 1d <u>14,389.</u> Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 4 5 944,862. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 47,243. Minimum investment return. Enter 5% of line 5 Part XI | Distributable Amount (see instructions) (Section 4942(i)(3) and (i)(5) private operating foundations and certain foreign organizations check here
and do not complete this part.) 47,243. Minimum investment return from Part X, line 6 423. 2a 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 20 Add lines 2a and 2b 46,820 Distributable amount before adjustments. Subtract line 2c from line 1 3 3 4 Recoveries of amounts treated as qualifying distributions 46,820. 5 5 Add lines 3 and 4 6 Deduction from distributable amount (see instructions) 46,820 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 62,698. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 1b b Program-related investments - total from Part IX-B 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: 3 3a a Suitability test (prior IRS approval required) **b** Cash distribution test (attach the required schedule) 3b 62,698. 4 Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b 62,275. Adjusted qualifying distributions. Subtract line 5 from line 4 6

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

Form **990-PF** (2015)

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,	Oorpus	Tours prior to 2011		
line 7				46,820.
·····				20/0200
2 Undistributed income, if any, as of the end of 2015 a Enter amount for 2014 only			0.	
b Total for prior years:				
y rotal for prior years.		0.		
3 Excess distributions carryover, if any, to 2015:				
a From 2010 900.				
b From 2011				
c From 2012 1,509.				
d From 2013 6,808.				
e From 2014 715.				
f Total of lines 3a through e	9,932.			
4 Qualifying distributions for 2015 from	<u> </u>			
Part XII, line 4: ► \$62,698.				
a Applied to 2014, 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 2015 distributable amount				46,820.
e Remaining amount distributed out of corpus	15,878.			
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:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	25,810.			
b Prior years' undistributed income. Subtract	25,010.			
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				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 2010				
not applied on line 5 or line 7	900.			
9 Excess distributions carryover to 2016.				
Subtract lines 7 and 8 from line 6a	24,910.	_		
10 Analysis of line 9:				
a Excess from 2011				
b Excess from 2012 1,509.				
c Excess from 2013 6,808.				
d Excess from 2014 715.				
e Excess from 2015 15,878.			L	5 000 DE (00.45)

Form 990-PF (2015) MADIGAN	FAMILY	FOUNDATION			100242 Page 10
Part XIV Private Operating F	oundations	(see instructions and Part	VII-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination le	tter that it is a private operatin	g		
foundation, and the ruling is effective fo	r 2015, enter the (date of the ruling	▶ _		·
b Check box to indicate whether the found	lation is a private	operating foundation describe	d in section	4942(j)(3) or 4	942(<u>J)(5)</u>
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
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					
d Amounts included in line 2c not				-	
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon: 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	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 Part XV Supplementary Info	rmation (Co	mnlete this part on	ly if the foundat	tion had \$5 000 or m	ore in assets
at any time during t			iy ii die loulida	11011 1144 4 0,000 01 11	iore in addets
	 				
 Information Regarding Foundation List any managers of the foundation wh 		nd more than 2% of the total o	ontributions received b	v the foundation hefore the cl	nce of any tay
year (but only if they have contributed i			ond inacions received o	y the foundation before the G	USE OF ALLY LAX
JAMES E. MADIGAN		,- (, /, /, /, /, /, /,			
b List any managers of the foundation wh	10 own 10% or m	ore of the stock of a cornorati	on (or an equally large	nortion of the ownership of a	nartnership or
other entity) of which the foundation ha			on to an oducin in de	portion of the officiality of a	parmiconip or
NONE	•				
2 Information Regarding Contribut	ion Grant Gift	Loan Scholarshin etc	Programs		
Check here ► X If the foundation		· · · · · · · · · · · · · · · · · · ·	_	loes not accept unsolicited rea	nuests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num					
a the hame, address, and telephone ham	ibor or o managa	roos or the person to whom a			
b The form in which applications should	be submitted and	information and materials the	y should include:		
a Any authorized deadliness					
c Any submission deadlines:					
d Any restrictions or limitations on award	ls, such as by geo	graphical areas, charitable fie	lds, kinds of institution	s, or other factors:	

23-7400242

Page 10

Total

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

Enter gross amor	unts unless otherwise indicated.	Unrelate	ed business income		ded by section 512, 513, or 514	(e)
_		(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
1 Program serv		Code		0000		
						
c						
d						
e				+		
f						
-	contracts from government agencies		_			
2 Membership	dues and assessments					
3 Interest on sa	vings and temporary cash					
investments						
4 Dividends and	d interest from securities			14	46,752.	
5 Net rental inc	ome or (loss) from real estate:					
a Debt-fınar	nced property					
	inanced property					
	ome or (loss) from personal					
property						
7 Other investn	nent income			1		
	from sales of assets other					_
than inventor				18	-19,313.	
	y r (loss) from special events			1 10	15,515.	
			 			
	or (loss) from sales of inventory			╁┈		
11 Other revenue						
		-		<u> </u>		
b				-		-
c				- 		
d				╂	1	
e				+-	05.400	
	l columns (b), (d), and (e)		0.	<u>, l</u>	27,439.	
	ne 12, columns (b), (d), and (e)				13	27,439.
(See worksheet	n line 13 instructions to verify calculations.)					
Part XVI-B	Relationship of Activities to	the Acc	omplishment of Ex	xemp	t Purposes	
	Explain below how each activity for which incon			A contri	buted importantly to the accom	plishment of
	he foundation's exempt purposes (other than b					
NO	INCOME FROM ANY ACTI	VITY C	THER THAN IN	<u>IVES</u>	TMENTS.	
					 .	
						
					· · -	
					<u>-</u>	
			_	-		
						
		<u> </u>				

Unrelated business income

23-7400242 MADIGAN FAMILY FOUNDATION Page 13 Form 990-PF (2015) Information Regarding Transfers To and Transactions and Relationships With Noncharitable Part XVII **Exempt Organizations** Yes No 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: X 1a(1) X 1a(2) (2) Other assets **b** Other transactions: 1b(1) (1) Sales of assets to a noncharitable exempt organization X 1b(2) (2) Purchases of assets from a noncharitable exempt organization X 1b(3) (3) Rental of facilities, equipment, or other assets X (4) Reimbursement arrangements 1b(4) 1b(5) X (5) Loans or loan guarantees X 1b(6) (6) Performance of services or membership or fundraising solicitations X 1c c Sharing of facilities, equipment, mailing lists, other assets, or paid employees If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (c) Name of noncharitable exempt organization (b) Amount involved (d) Description of transfers, transactions, and sharing arrangements (a) Line no 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No Yes in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule. (c) Description of relationship (a) Name of organization (b) Type of organization N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge May the IRS discuss this return with the preparer rmation of which preparer has any knowledge correct, and complete Declarati Sign Here TRUSTEE X Yes Sugnature of officer or trustee Date Trtle Check PTIN Date Print/Type preparer's name Preparer's signature self-employed Paid P00007603 STEVEN G. HANDRICK Preparer Firm's EIN ► 39-0912608

Form **990-PF** (2015)

Phone no. 920.336.9850

Use Only

Firm's name ► HAWKINS ASH CPAS,

Firm's address ► 2360 DUCK CREEK PARKWAY

GREEN BAY, WI 54303-3300

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.ls.gov/form990.

OMB No 1545-0047

2015

Name of the organization

Employer identification number

	MADIGAN FAMILY FOUNDATION	23-7400242
Organizat	on type (check one):	
Filers of:	Section:	
Form 990	r 990-EZ 501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-	F 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
-	ur organization is covered by the General Rule or a Special Rule. a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	9. See instructions
General R	ile	
_	r an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling soperty) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's	
Special R	les	
s a	r an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to ctions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or y one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount (ii) Form 990-EZ, line 1 Complete Parts I and II.	or 16b, and that received from
у	r an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a ar, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educa e prevention of cruelty to children or animals Complete Parts I, II, and III.	
y Is P	or an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a car, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled monochecked, enter here the total contributions that were received during the year for an exclusively religious, irpose. Do not complete any of the parts unless the General Rule applies to this organization because it igious, charitable, etc., contributions totaling \$5,000 or more during the year	re than \$1,000. If this box chantable, etc ,
but it mus	In organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B 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 Fort does not meet 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 8 (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

Employer identification number

MADIGAN FAMILY FOUNDATION

23-7400242

Part I	Contributors (see instructions). Use duplicate copies of Part I if	f additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DANIEL MADIGAN 804 S MADISON STREET GREEN BAY, WI 54301	\$20,000.	Person X Payroll
(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.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Complete Part II for noncash contributions.)

Employer identification number

MADIGAN FAMILY FOUNDATION

23-7400242

Part I (a) No. (b) PMV (or estimate) (see instructions) (a) No. (c) PMV (or estimate) (see instructions) (b) PMV (or estimate) (see instructions) (c) PMV (or estimate) (see instructions) (d) Date received the property given (see instructions) (a) No. (b) PMV (or estimate) (see instructions) (a) No. (c) PMV (or estimate) (see instructions) (a) No. (b) PMV (or estimate) (see instructions) (d) Date received the property given (see instructions) (e) PMV (or estimate) (see instructions) (f) PMV (or estimate) (see instructions) (g) PMV (or estimate) (see instructions)	Part II	Noncash Property (see instructions). Use duplicate copies of P	art II if additional space is needed	
(a) No. from Part I (a) No. from Description of noncash property given	No. from		FMV (or estimate)	(d) Date received
(a) No. pescription of noncash property given				
No. torm Description of noncash property given S			 \$	
(a) No. room Description of noncash property given (a) No. room Description of noncash property given (b) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) Date received the property given (see instructions) (a) No. room Description of noncash property given (see instructions) (a) No. room Description of noncash property given (see instructions) (a) No. room Description of noncash property given (see instructions) (b) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) Date received the property given (see instructions)	No. rom		FMV (or estimate)	(d) Date received
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(a) No. Description of noncash property given (b) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) Date receiv (a) No. Tom Description of noncash property given (b) FMV (or estimate) (c) FMV (or estimate) (see instructions) (d) Date receiv				
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(a) No. (b) FMV (or estimate) from Description of noncash property given (c) FMV (or estimate) (see instructions) Date receiv				
No. (b) FMV (or estimate) (d) from Description of noncash property given (see instructions) Date receiv			\$	
	No. from		FMV (or estimate)	(d) Date received
\$				

Employer identification number

	N FAMILY FOUNDATION	9 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	23 - 7400242 a section 501(c)(7), (8), or (10) that total more than \$1,000 for
art III	the year from any one contributor. Complete of	olumns (a) through (e) and the followi	ng line entry. For organizations
	completing Part III, enter the total of exclusively religious Use duplicate copies of Part III if additiona	, charitable, etc., contributions of \$1,000 or lead space is needed.	ss for the year (Enterthis info once)
n) No.			(d) Description of how gift is hold
art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
		1.71D 4	Deleteration of the reference to the medium
	Transferee's name, address, an	IG ZIP + 4	Relationship of transferor to transferee
a) No		<u> </u>	
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
		(e) Transfer of gift	
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
(a) No			
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
			· · · · · · · · · · · · · · · · · · ·
(a) No			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
raiti			
 		(e) Transfer of gift	1
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
			· · · · · · · · · · · · · · · · · · ·

MADIGAN FAMILY FOUNDATION
Part IV | Capital Gains and Losses for Tax on Investment Income

sses for Tax on Investment Income		Ta s 47	, 	
describe the kind(s) of property solo ick warehouse; or common stock, 20	d, e.g., real estate, 00 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
T INC			02/10/12	07/02/15
C SHS			05/24/11	07/02/15
C SHS			05/24/11	07/02/15
C SHS			12/13/11	07/02/15
C SHS			12/31/11	07/02/15
E & INCOME			04/16/10	07/02/15
E & INCOME			+	
E & INCOME				
	<u> </u>			
IC SVC CLD			03/20/86	11/13/15
(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale			
	16.418.	-		-7,217.
				-2,915.
				-1,458.
				-2,130.
	7,275.			-1,421.
	18,113.			-2,335.
	5,162.			-500.
	25,521.			-4,005.
	24,558.			442.
	25,000.			0.
	8,109.			2,226.
	_			
(1)	10/04/00			
_ <u> </u>		(I) Lo	SSes (from col. (h))	col (k)
(j) Adjusted basis as of 12/31/69	(k) Excess of col. (ı) over col. (<u>ı)</u> , ıf any			
		 _		-7,217.
			_	-2,915.
				-1,458.
				-2,130.
				-1,421.
				<u>-2,335.</u>
			_ 	<u>-500.</u>
-				<u>-4,005.</u>
			_	442.
	-			<u> </u>
	-			2,220.
-				
apital loss) { If gain, also enter	in Part I, line 7	2		-19,313.
ss) as defined in sections 1222(5) an				
column (c). B	}	3	N/A	
	describe the kind(s) of property solick warehouse; or common stock, 20 T INC C SHS C SHS C SHS C SHS E & INCOME E & INCOME GROUP CLD NC. CLD IC SVC CLD (f) Depreciation allowed (or allowable) (j) Adjusted basis as of 12/31/69 as of 12/31/69	describe the kind(s) of property sold, e.g., real estate, ack warehouse; or common stock, 200 shs. MLC Co. TINC CSHS CSHS CSHS CSHS CSHS CSHS CSHS CS	Describe the kind(s) of property sold, e.g., real estate, rick warehouse; or common stock, 200 shs. MLC Co. Denation	

FORM 990-PF DIVIDEN	DS AND INTER	EST FROM SECUR	ITIES ST	PATEMENT 1
GROSS SOURCE AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
MERRILL LYNCH 46,75	52.	0. 46,752.	46,752.	
TO PART I, LINE 4 46,75	52.	0. 46,752.	46,752.	
FORM 990-PF	ACCOUNTI	NG FEES	Si	PATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	4,100.	4,100.	*	0.
TO FORM 990-PF, PG 1, LN 16E	4,100.	4,100.		0.
FORM 990-PF	TAX	ES	Sī	PATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EXCISE TAXES	448.	0.		0.
TO FORM 990-PF, PG 1, LN 18	448.	0.		0.
FORM 990-PF	OTHER E	XPENSES	Si	PATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
SERVICE FEES	310.	310.		0.
TO FORM 990-PF, PG 1, LN 23	310.	310.		0.

FORM 990-PF OTHER INCREASES IN NET ASSETS	OR FUND BALANCES	STATEMENT 5
DESCRIPTION		AMOUNT
PRIOR PERIOD FMV ADJUSTMENT UNREALIZED GAIN/LOSS ADJUSTMENT		152,374. 111,216.
TOTAL TO FORM 990-PF, PART III, LINE 3		263,590.
FORM 990-PF CORPORATE S	STOCK	STATEMENT 6
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
STATEMENT ON FILE	842,772.	842,772.
TOTAL TO FORM 990-PF, PART II, LINE 10B	842,772.	842,772.
FORM 990-PF CORPORATE I	BONDS	STATEMENT 7
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
STATEMENT ON FILE	37,100.	37,100.
TOTAL TO FORM 990-PF, PART II, LINE 10C	37,100.	37,100.
FORM 990-PF OTHER INVEST	TMENTS	STATEMENT 8
	ATION	STATEMENT 8 FAIR MARKET VALUE
VALUA	ATION HOD BOOK VALUE	FAIR MARKET

FORM 990-PF	OTHER ASSETS		STATEMENT	9
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKE VALUE	T
TAX REFUND RECEIVABLE	127.	57.		57.
TO FORM 990-PF, PART II, LINE 15	127.	57.		57.
FORM 990-PF EXPLANATION CONCER	NING PART VII-A.	LINE 8B	STATEMENT	10

EXPLANATION

NOT REQUIRED TO FILE WITH THE STATE DUE TO NEITHER SOLICITING NOR RECEIVING CONTRIBUTIONS.

Madigan Family Foundation 23-7400242 2015 Form 990-PF, Part 11, Lines 105, 10c, 913

Fiscal Statement

MADIGAN FAMILY FOUNDATION

CURRENT PORTFOLIO SUMMARY

Quantity	Security Description	Date Acquired	Total/Adj Cost Basis	Fiscal Year Value 06/30/16	Unrealized Gain or (Loss)	Est Accrued Interest	Est Annual Income
		Cash a	Cash and Money Funds				
25,464	CASH ML BANK DEPOSIT PROGRAM	11/24/06	969 53 25,464.00	969 53 25,464.00			2 55
	Total Cash and Money Funds		26,433.53	26,433.53		1	2.55
		Corl	Corporate Bonds				
1,400	ML PFD CAPITAL TRUST III PFD STOCK 07.3750% SEP 15 2067	20/51/80	35,000.00	37,100.00	2,100.00		2,581 00
	Total Corporate Bonds	l	35,000.00	37,100.00	2,100.00	0.00	2,581.00
		CURRENT PC	CURRENT PORTFOLIO SUMMARY	ιRγ			
Quantity	Security Description	Date Acquired	Total/Adj Cost Basis	Fiscal Year Value 06/30/16		Unrealized Gain or (Loss)	Est Annual Income
			Equities				
350	AMEREN CORP	08/23/04	16,376.50	18,753.00		2,376.50	595 00
250	AMEREN CORP	10/10/07	13,722 50	13,395.00		(327.50)	425 00
200	ABBVIE INC SHS	03/27/14	26,089 00	30,955 00		4,866.00	1,141.00
700	AT&T INC	04/16/10	18,396 91	30,247 00		11.850.09	1,344.00
300	AT&T INC	07/02/15	10,866 39	12,963.00		2,096.61	976 00
56666666 X	PLEASE SEE REVERSE SIDE Page Statement Period 5 of 24 Year Ending 06/30/16	Account No 3/16 692-04262					

FINA Fiscal Statement

CURRENT PORTFOLIO SUMMARY

MADIGAN FAMILY FOUNDATION

α α α α α α	Date Security Description Acquired	Total/Adj Cost Basis	Fiscal Year Value 06/30/16	Unrealized Gain or (Loss)	Est Annual Income
CONOCOPHILLIPS CROWN CASTLE REIT INC SHS DUKE REALTY CORP REIT DOMINION RES INC NEW VA DUKE ENERGY CORP NEW O7/29/ DUKE ENERGY CORP NEW O7/29/ GLAXOSMITHKLINE PLC ADR GLAXOSMITHKLINE PLC ADR GLAXOSMITHKLINE PLC ADR GAMESTOP CORP NEW CL A O3/11,					
CONOCOPHILLIPS CROWN CASTLE REIT INC SHS DUKE REALTY CORP DUKE EALTY CORP NEW DUKE ENERGY CO		Equities			
CROWN CASTLE REIT INC SHS DUKE REALTY CORP BOUNE ENERGY CORP NEW DUKE EN		26,902 55	20,710.00	(6,192.55)	475 00
DUKE REALTY CORP REIT DOMINION RES INC NEW VA DUKE ENERGY CORP NEW DUKE		32,652.76	40,572.00	7,919 24	1,416.00
01/07/ 08/28/ 07/29/ 07/29/ 01/09/ 01/09/ 01/09/ 01/09/ 01/09/ 01/09/ 01/09/ 01/09/ 01/09/		19,595.16	26,660.00	7,064 84	721 00
08/05/ 08/28/ 11/04/ 07/29/ 07/29/ 01/09/ 01/09/ 08/11/	//0/10	4,455 09	15,274 28	10,819 19	549 00
08/28/ 11/04/ 07/29/ 01/09/ 01/09/ DR 03/11/		11,958 95	26,680 69	14,721.74	1,027 00
11/04/ 07/29/ 07/29/ 01/09/ 01/09/ 0R 03/11/ - A 03/11		12,327 24	22,391 19	10,063 95	862.00
07/29/ 07/29/ 10/10/ 01/09/ DR 07/18/ DR 03/11/		4,297 25	8,922.16	4,624.91	344,00
07/29/ 10/10/ 01/09/ DR 07/18/ DR 03/11/		6,368 41	11,152 70	4,784.29	429 00
10/10/ 01/09/ 01/18/ 07/18/ 03/11/		4,266 93	7,463 73	3,196.80	288.00
01/09/ DR 07/18/ DR 03/11/		6,966 59	10,123 22	3,156.63	390.00
DR 07/18/ DR 03/11/		9,704 18	30,996 00	21,291 82	951.00
03/11/ A 03/11/		27,043.35	21,670.00	(5,373.35)	1,158.00
. A 03/11/		12,255 60	13,002 00	746 40	00 569
	11/20	24,920 00	21,264.00	(3,656 00)	1,184 00
1,000 KINDER MORGAN INC DEL 10/27/15	RGAN INC DEL 10/27/15	27,531.60	18,720.00	(8,811 60)	200 00

PLEASE SEE REVERSE SIDE

Statement Period Account No
6 of 24 Year Ending 06/30/16 692-04262

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CURRENT PORTFOLIO SUMMARY

MADIGAN FAMILY FOUNDATION

Quantity	Security Description	Date Acquired	Cost Basis	Fiscal Year Value 06/30/16	Gain or (Loss)	Annual
			Equities			
200	LAS VEGAS SANDS CORP	03/11/16	25,994 00	21,745.00	(4,249.00)	1,440 00
200	MERCK AND CO INC SHS	04/16/10	17,933.00	28,805.00	10,872.00	920 00
300	PG&E CORP	10/01/93	10,993 00	19,176 00	8,183 00	588.00
300	PG&E CORP	01/07/94	10,082 90	19,176.00	9,093.10	588.00
1,100	PFIZER INC	04/16/10	18,792.40	38,731 00	19,938.60	1,320.00
200	PINNACLE WEST CAP CORP	09/13/07	20,355 00	40,530 00	20,175 00	1,250.00
200	PINNACLE WEST CAP CORP	09/13/07	8,144 00	16,212 00	8,068.00	200 00
468	SPECTRA ENERGY CORP	08/02/03	8,648 60	17,142 84	8,494.24	759.00
156	SPECTRA ENERGY CORP	11/04/03	3,099 86	5,714 28	2,614 42	253 00
376	SPECTRA ENERGY CORP	08/05/10	8,266.96	13,772 88	5,505.92	610.00
1,500	STARWOOD PPTY TR INC COMMON STOCK	10/27/15	30,229 95	31,080 00	850.05	2,880 00
485	WEC ENERGY GROUP INC SHS	05/05/92	11,974 01	31,670 50	19,696.49	961 00
197	WEC ENERGY GROUP INC SHS	05/27/92	4,995 86	12,864 10	7,868.24	391.00
87	WEC ENERGY GROUP INC SHS	08/11/11	3,652 60	5,681 10	2,028 50	173 00
133	WEC ENERGY GROUP INC SHS	08/11/11	5,597.08	8,684.90	3,087 82	264 00
200	TANGER FACTORY OUTLT CEN REIT	02/04/03	1,431.01	8,036.00	6,604.99	260 00
566666666 ×		1 Account No 30/16 692-04262				



CURRENT PORTFOLIO SUMMARY

					:	
Quantity	Security Description	Date Acquired	Total/Adj Cost Basis Va	Fiscal Year Value 06/30/16	Unrealized Gain or (Loss)	Est Annual Income
			Equities			
009	TANGER FACTORY OUTLT CEN REIT	08/02/03	5,026 36	24,108.00	19,081 64	780 00
400	TANGER FACTORY OUTLT CEN REIT	08/02/03	3,351 92	16,072 00	12,720 08	520 00
200	VERIZON COMMUNICATNS COM	06/14/12	21,713 50	27,920.00	6,206.50	1,131 00
800	XCEL ENERGY INC	09/01/93	19,386.00	35,824.00	16,438.00	1,089 00
400	XCEL ENERGY INC	10/10/01	8,976.00	17,912 00	8.936.00	545 00
	Total Equities		565,340.97	842,772.57	277,431.60	32,292.00
		Mutual Funds/	Mutual Funds/Closed End Funds/UIT			
1,500	FIRST TR ENERGY INCOME & GROWTH FD	11/12/13	46,275 51	38,220.00	(8.055.51)	3,480 00
3,000	NUVEEN TX-ADV TR STRAT TOTAL RETURN STRATEGY FD	05/12/15	40,354 77	33,840.00	(6.514.77)	3,096 00
4,000	FIRST TR SR FL II SR FLOAT RATE INC FD II	02/06/15	52,789 00	51,400 00	(1,389 00)	3,361 00
	Total Mutual Funds/Closed End Funds/UIT		139,419.28	123,460.00	(15,959.28)	9,937.00

PLEASE SEE REVERSE SIDE Page Statement Period 8 of 24 Year Ending 06/30/16

Account No 692-04262

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Madigan Family Foundation 23-7400242 2015 Form 990-PF, Part XV, Line 3a

FINA Fiscal Statement

MADIGAN FAMILY FOUNDATION

SUMMARY OF VISA CARD ACTIVITY FOR CYNTHIA MADIGAN BELL

Date Cleared	Transaction Date	Description	Location	Amount
91/90/10	07/02/15	BB *SI & SIF	312-419-7411 IL Serra International	250.00
		Total Visa Card Activity For CYNTHIA MADIGAN BELL		250.00
		Total Visa Card Activity		250.00
			5,305.00 +	
Pate Classes		SUMMARY OF CHECKING ACTIVITY	5,555.00 *	•
	rate willen	Click Willibel	røyse	ATTOUN
07/09/15	06/25/15 09/09/15	00001392	ORDER OF THE HOLY SEPULCHRE DAVID ZUBIK	30.00 30.00
11/24/15	11/04/15	00001394 00001395	BF ROBERT BANKS BP DAVID RICKEN	800
12/23/15	11/18/15	00001398	CATHOLICA FON BISHOPS APPEAL	20000
01/14/16	12/18/15	00001396	SERRA INTL FDN	1,000.00
12/24/15 01/13/16	12/18/15 12/18/15	00001397	RICHARD MARTHA CTR THE GATHERING PLACE	00.001
12/30/15	12/18/15		SISTERS OF ST FRANCIS OF THE H	50.00
12/24/15	12/18/15		NOTINE DAME ALAD EQUESTRIAN ORDER OF HOLY SEPUL	60.00 60.00
12/29/15	12/18/15		SERRA CLUB OF WEST GREEN BAY	280.00
12/29/15	12/18/15	00001405	PAULS PANIKY GLOBAL OUTREACH	80.08
03/15/16	02/20/16	00001407	ROBERT BANKS	20.00
03/08/16	03/06/16	00001408	SERRA INTL	8.63
05/03/16	04/15/16	00001410	FR DAVE RUBY	25.00
05/17/16 06/13/16	05/17/16 05/17/16	00001411 00001412	SERRA CLUB OF MANITO WOC CNTY BISHOP BURRE FUND DIOCESE OF G	40.00 100.00
		Total Checking Activity		5,305.00
\$4.895.63	PLEASE SEE REVERSE SIDE Page Stateme 7 of 10 Year En	SE SIDE Statement Period Account No. Year Ending 06/30/16 692-04002		

SUMMARY OF CHECKING ACTIVITY

Check Number

Date Written

Date Cleared

10/07/15	00/00/00	00002585 00002648	PAYEE UNRECORDED PAYEE UNRECORDED	100.00 50.00
07/30/15	06/09/15	00002548	NAMI OF BROWN COUNTY	00.00
07/09/15	06/16/15	00002550	ORDER OF THE HOLY SEPULCHRE	200.00
07/14/15	07/09/15	00002551	STELLA MARIS PARISH	30.00
51/62/10	51/00/15	00002552	NATIONAL LAW ENFORCEMENT	800
07/17/15	07/09/15	00002553	CATHOLIC EXTENSION	8.6
07/16/15	07/09/15	00002555	BAY LAKES COUNCIL BSA	20.00
07/21/15	07/09/15	00002556	COVENANT HOUSE	888
07/22/15	07/09/15	00002557	MARCH OF DIMES	20.00
07/23/15	07/14/15	00002558	AMERICAN CANCER SOCIETY	20.09
07/24/15	07/14/15	00002559	NATIONAL CANCER RESEARCH CENT	20.08
21/12/10	07/14/15	00002560	CATHOLIC WELFARE ASSN	900
07/28/15	07/28/15	00002554	ARCHDIOCESE FOR THE MILITARY S	100.00
08/05/15	21/82/50	00002561	NATIONAL GLAUCOMA RESEARCH	20 20 20 20 20 20 20 20 20 20 20 20 20 2
08/04/15	07/28/15	00002562	AMERICAN HEART ASSN	20.00
68-86666 ×	PLEASE SEE RE Page 17 of 24	PLEASE SEE REVERSE SIDE Page Statement Period Account No. 17 of 24 Year Ending 06/30/16 692-04262		

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Date Cleared	Date Written	Check Number	Payee	Amount
38/06/15	07/28/15	00002563	CATHOLIC RELIEF SERVICES	75.00
08/05/15	07/29/15	00002564	MACULAR DEGENERATION RESEARCH	20.00
08/12/15	07/29/15	00002565	ALZHEIMERS ASSOCIATION	9.00r
08/11/15	07/29/15	00002566	BROWN CO SHERIFFS BENEVOLENT A	25.00
08/06/15	07/29/15	00002567	CENTER OF GREATER GREEN BAY	20.00
08/07/15	08/03/15	00002568	ST NORBERT COLLEGE	1,500.00
08/18/15	08/05/15	00002569	US OLYMPIC COMMITTEE	20.00
08/27/15	08/05/15	000002570	NEVILLE PUBLIC MUSEUM FUN	20.00
21/175 21/175	08/05/15	00002571	CF SEMINARIAN COLLECTION	200.00
08/20/15	21/11/30	00002572	THE AMERICAN LEGION	80.03
08/18/15	08/11/15	00002573	WI PUBLIC 1V	200
08/18/15	SIVILIZ	00002574		20.00
08/18/15	21/1/15	00002575	CASCLICA NATIONAL SHKINE IMMAC	8.65
87073	21/11/80	000025/6	INE VALVATION AKMY	30.0S
50,606	09/01/15	00002577	NAIL SHKINE	00.67
51/12/6	51/11/60	00002578	υ <u>.</u> Ε	40.00
09/24/15	61/11/60	00002579	EWIN	20.02
9/23/15	09/11/15	00002580	WOUNDED WARRIOR PROJECT	50.00
09/28/15	09/11/15	00002581	CITIZENS AGAINST GOVT WASTE	50.00
10/05/15	69/11/15	00002582	EASTER SEALS	40.00
09/21/15	09/11/15	00002583	THE SALVATION ARMY	50.00
10/06/15	51/62/60	00002884	FGIONARIES OF CHRIST	20.00
10/19/15	10/13/15	0002585	CHRATIVE CONNECTIONS	250.00
0/19/15	10/13/15	0000587	VOTABA 2: II I PO	150.00
100001	15050	0000200	CT COUNCE CERMINADO	999
2000	10(3/13	0000000	STANDARD SEMINARY STANDARD TO THE STANDARD SEMINARY STANDARD SEMINARY STANDARD SEMINARY SEMIN	
CI /92/01	10/13/10	6957000	DOOR CO PROPERTY OWNERS INC	30.00
51,02/01	51/51/01	0662000	DOUR CO LAND IRUS!	00.00
0/22/15	10/14/15	00002591	TRANCISCAN FOR HOLY LAND	00.001
0/29/15	10/20/15	00002592	ALZHEIMERS ASSOCIATION	00.00
0/29/15	10/20/15	00002593	SPECIAL OLYMPICS	20.00
0/27/15	10/20/15	00002594	HOLY CROSS PARISH	100.00
1/12/15	10/25/15	00002599	NOTRE DAME ACAD	100.00
1/04/15	10/27/15	00002595	THE HONORABLE ORDER OF KY COLS	20.00
0/30/15	10/27/15	00002596	GREEN BAY AREA CATHOLIC ED	3,000.00
1/05/15	10/28/15	00002598	FRANCISCAN FRIARS OF ATONEMENT	20.00
1/05/15	10/29/15	00005600	AMERICAN DIABETES ASSN	20.00
1/16/15	10/29/15	00002601	WISCONSIN STATE COUNCIL	20.00
1/09/15	31/62/01	00002602	NORBERTINE COMMUNITY	200:00
1/27/15	10/29/15	00005603	KNIGHTS OF COLUMBUS 4505	20.00
2/01/15	11/06/15	00002604	ST PAUL CATH CH	100.00
	PLEASE SEE REVERSE SIDE	VERSE SIDE		
	Page	int Period		
	18 of 24	Year Ending 06/30/16 692-04/262		



	Amount	2000 1,500.00 1,500.00 1,000.0	50.00 300.00 1,000.00 100.00	
ING ACTIVITY	Payee	HERITAGE HILL FDN THE NATIONAL WWWI MUSEUM CATHOLIC RELIEF SVCS CERBISHOPS APPEAL CATH FDN SACRED HEART SOUTHERN MISSION SPECIAL OLYWRICS CEREBRAL PALSY INC ST NORBERT COLLEGE HOLY CROSS PARISH FATHER MIKE WEBER EQUESTRIAN ORDER OF THE HOLY S MARQUETTE ASSEMBLY KNIGHTS OF ST JOHN THE EVANGELIST SHELTER ST JOHN THE EVANGELIST SHELTER FATHER RICHARD GETCHEL SISTER EVELYN LIUS BISHOP DAVID H E ADAM CARDINAL MAZDA BISHOP DAVID H E ADAM CARDINAL MAZDA BISHOP DAVID SISTERS JOHN HEPNER FR CHUCK KEFEE ESTHER JOHN HEPNER FR PETER CAMPBELL FATHER BILL KUHP SISTERS OF ST FRANCIS OF HOLY BISHOP FRANK DEWANE FATHER BILL KUHP SISTERS OF ST FRANCIS OF HOLY BISHOP FRANK DEWANE FATHER WEBER NEW COMMUNITY SHELTER INC CATHOLIC LEAGUE	NAMI WISCONSIN THE GATHERING PLACE RELEVANT RADIO THE CRUDEM FOUNDATION	
SUMMARY OF CHECKING ACTIVITY	Check Number	Check Number 00002605 00002609 00002610 00002611 00002613 00002614 00002618 00002619 00002620 00002620 00002620 00002620 00002620 00002620 00002620 00002620 00002620 00002630 00002630 00002630 00002630 00002630 00002630 00002630 00002630	00002643 00002644 00002646 00002647	VERSE SIDE Statement Period Account No. Year Ending 06/30/16 692-04262
	Date Written	11/06/15 11/06/15 11/13/15 11/13/15 11/13/15 11/13/15 11/13/15 11/23/15 11/23/15 11/23/15 11/23/15 12/03/15 12/03/15 12/03/15 12/03/15 12/03/15 12/04/15 12/04/15 12/04/15 12/04/15 12/04/15 12/04/15 12/04/15 12/04/15 12/04/15	12/08/15 12/10/15 12/10/15	PLEASE SEE REVERSE SIDE Page Stateme 19 of 24 Year En
	Date Cleared	Date Cleared 11/18/15 11/18/15 11/18/15 11/18/15 11/18/15 11/18/15 11/18/15 11/18/15 11/18/15 12/03/15 12/03/15 12/03/15 12/03/15 12/03/15 12/03/15 12/03/15 12/03/15 12/03/15 12/03/15 12/03/15 12/13/15	12/23/15 01/13/16 12/17/15 12/16/15	68685265 ×



SUMMARY OF CHECKING ACTIVITY

Date Cleared	Date Written	Check Number	Payee	Amount
12/17/15	12/10/15	00002649	ORDER OF THE HOLY SEPULCHRE	1,000,00
51/1/21	51/11/21 31/11/21	00002650	SI VINCENIS MOSP	300.00
61/2010	12/11/15	00002652	ROTARY FON OF GREEN BAY	100.00
12/23/15	12/11/15	00002654	ORDER OF MALTA AMER ASSN	1,500.00
12/23/15	12/16/15	00002653	SHRINE OF OUR LADY OF GOOD HEL	100.00
12/31/15	12/16/15	00002655	GREEN BAY FRATERNAL ORDER OF P	25.00
12/31/15	12/16/15	9592000	AMERICAN RED CROSS	20.00
12/29/15	12/16/15	00002657	CATH YOUTH EXPEDITIONS	1,000.00
12/30/15	21/91/21	00002638	CORALIVE CONNECTIONS	0000
01/04/16	2L/87/2L	00002617	CEDDA OF ID OF OBERN BAX	90.03
20172	51/15/21	00002045	DENKA CLUB OF GREEN BAT	35
01/14/16	01/05/16	00002659	SPECIAL OLYMPICS WI	20.05
01/12/16	01/05/16	00002660	WEIDNER CENTER	100.00
01/14/16	01/05/16	00002661	SERRA INTL FON	1,000.00
91/51/10	01/08/16	00002662	MT TABOR CTR	100.00
02/24/16	01/28/16	00002663		250,002
02/17/16	01/2B/16	00002664	SOTABLE FOR BIOSPIRITORE RES	300.00
02/03/16	91/53/10	00002603	CLIDATIVE CONNECTIONS	20.05
91/02/20	02020	CONTRACTOR	HOLY JAND DEVIEW	10.00
51/51/50	03/09/16	000000	HOLY CROSS PARISH	100.00
03/21/16	03/09/16	00002669	FRANCISCAN MISSION	20.00
03/17/16	03/09/16	00002670	CATHOLIC NEAR EAST WELFARE	100.00
03/30/16	03/16/16	00002671	GREEN BAY SERRA CLUB	100.00
03/30/16	03/22/16	00002673	NWTC EDUCATIONAL FDN	1,000.00
03/29/16	03/29/16	00002672	HOLY CROSS PARISH	888
04/08/16	03/30/16	00002674	COVENANT HOUSE	20.00
04/28/16	04/22/16	00002675	LITURGICAL PUBLICATIONS INC	85.58 85.58 85.58
91/10/90	01/40/40 91/30/30	00002676	THE GATHERING PLACE	00.00 00.00 00.00 00.00
03/10/16	01/00/30 91/00/30	000000 0000000	HOLOGO PADISH	100.00
06/08/16	05/31/16	00002679	THOMAS VORPAHL	202:00
06/28/16	06/20/16	00002680	SS PETER & PAUL	100.00
		Total Checking Activity	57,738.95 +	57,738.95
			100.	
			5,555,00 +	
	PLEASE SEE REVERSE SIDE	Pociod tra	150.00 -	
COMPANIE X	20 of 24	Year Ending 06/30/16 692-04262		
			59,043.95 *	